

THE OYSTER RIVER COOPERATIVE SCHOOL DISTRICT
SEXUAL HARRASSMENT AND SEXUAL VIOLENCE
REPORT FORM

General Statement of Policy Prohibiting Sexual Harassment

The School District maintains a firm policy prohibiting all forms of discrimination based on sex. Sexual harassment and sexual violence against students or employees is sexual discrimination. All persons are to be treated with respect and dignity. Sexual violence, sexual advances or other forms of personal harassment by any person, male or female, which create an intimidating, hostile or offensive environment, will not be tolerated under any circumstances.

Complainant: _____

Home Address: _____

Work Address: _____

Home Phone: _____

Work Phone: _____

Date of Alleged Incident(s): _____

Name of person(s) you believe sexually harassed or was sexually violent toward you:

List any witnesses that were present:

Where did the incident(s) occur?

Describe the incident(s) as clearly as possible, including such things as: what force, if any, was used; any verbal statements (i.e., threats, requests, demands, etc.); what, if any, physical contact was involved; what did you do to avoid the situation, etc. (Attach additional pages if necessary.)

This complaint is filed based on my honest belief that _____ has sexually harassed or was sexually violent to me. I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

Complainant Signature: _____

Date: _____

Received by: _____

Date: _____