

Title IX COMPLAINT FORM



Instructions: This report should be submitted to the College's Title IX Coordinator, Alex Berry (N105), who will forward it to the proper office for appropriate action.

You may submit the form in person or via email at aberry@richland.edu.

As a survivor, you have the right to report or not report an incident. Filing a Title IX complaint serves as official notice to Richland Community College and authorizes the Title IX Coordinator to initiate a preliminary investigation into the information and allegations contained within the report.

INFORMATION REGARDING THE COMPLAINANT (Person filing the complaint)

Complainants Name: _____

College Status: Student Faculty Staff Not with the College

Complainants email: _____

Complainants telephone number: _____

INFORMATION REGARDING THE ALLEGED VICTIM (if not the complainant)

Name of the Victim: _____

College Status: Student Faculty Staff Not with the College

Victims email: _____

Victims telephone number: _____

INFORMATION REGARDING THE RESPONDENT (Person(s) the complaint is about)

Respondents Name: _____

College Status: Student Faculty Staff Not with the College

Respondents email (if known): _____

Respondent's telephone # (if known): _____

TYPE OF COMPLAINT (Select all that apply)

Sex Discrimination Sexual Assault Sexual Harassment Sexual Violence Retaliation Stalking

INCIDENT INFORMATION

Date and time alleged incident occurred: _____

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Location of the alleged incident: _____
Specific Location (Room/Address) _____

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Please list any witnesses who may have information regarding the alleged incident, along with email address and/or phone number if known:

- 60 V u@ V \ 7@#@ - Vu (Please provide as much information as possible including but not limited to: nature of the misconduct, gender of the parties, relationship between the parties, frequency of the misconduct, whether one or more of the parties were under the influence of alcohol or drugs at the time of the alleged misconduct, impact the conduct had on the complainant’s well-being. Attach additional pages and relevant documents.)

I certify that the information I have provided on this Complaint Form is true and accurate to the best of my knowledge.

Submitted by (print name)

Phone or email address

Signature

Current Date