

SEXUAL HARASSMENT, DISCRIMINATORY HARASSMENT AND/OR
DISCRIMINATION COMPLAINT FORM

Employees or students of Positive Education Program should submit the sexual harassment complaint form as soon as possible if they have been the victim of sexual harassment or witnessed it against another employee or student. Any employee or student filing a sexual harassment complaint is protected from any potential retaliation.

Date of Report: _____

Complainant Name: _____

Phone Number: _____

Position: _____ Building/Center: _____

Name of your immediate Supervisor: _____

Date and Time of Alleged Violation: _____

Location of Alleged Violation: _____

Name of Alleged Respondent: _____

Position: _____ Building/Center: _____

If the alleged violation was directed towards another individual, identify that individual:

Type of Alleged Violation (circle at least one):

Sexual Harassment

Discriminatory Harassment

Discrimination

If Discriminatory Harassment or Discrimination, on the basis of which protected classification is the violation alleged to have occurred (circle at least one):

Race

Sex

Ethnicity

Citizenship Status

Color

National Origin

Religion

Age

Sexual Orientation

Gender Identity or Expression Genetic Information

Military Status

Disability Other Characteristic Protected by Law (specify): _____

Name of Witnesses, if any, and Description of Involvement: _____

Description of the Incident(s) (attach additional pages, if necessary): _____

Your Reaction: _____

This complaint is based upon my honest belief that the above-alleged respondent has sexually harassed, discriminately harassed, or discriminated against me or another person. I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge.

Signature of Complainant : _____

Date _____

Please Submit Completed Form to Jessica Sawyer, PEP Chief Human Resources Officer/Title IX Coordinator

JSawer@pepcleve.org

Positive Education Program

3100 Euclid Ave

Cleveland, Oh. 44115