SEXUAL HARASSMENT FORMAL COMPLAINT FORM

Name and position of complainant
Date of complaint
Name of alleged sexual harasser
Date and place of incident
Description of misconduct
Name of witnesses (if any)
Has the incident been reported before?
If yes, when? to whom?
What was the resolution?
Reasons for dissatisfaction_
Note: Exhibit added

Policy Adopted: January 29, 1997 Wayne Central School District