

## **Complaint Form For Reporting Sexual Harassment**

New York State Labor Law requires all employers to adopt a sexual harassment prevention policy that includes a complaint form for employees to report alleged incidents of sexual harassment.

If you believe that you have been subjected to sexual harassment, you are encouraged to complete this form and submit it to:

## **Five Towns College Title IX Coordinator:**

Name/Title: Dana Gioe, J. D.

Office Address: FTC, Room 104A

Telephone Number: (631) 656-2189

Email Address: dana.gioe@ftc.edu

Once you submit this form, your employer must follow its sexual harassment prevention policy and investigate any claims.

If you are more comfortable reporting verbally or in another manner, your employer is still required to follow its sexual harassment prevention policy by investigating the claims.

For additional resources, visit: www.ny.gov/combatting-sexual-harassment

## **COMPLAINANT INFORMATION**

Name:	Job Title:
Home Address:	Home Phone:
Work Phone:	Work Address:
Email:	
Preferred Communication M	ethod:
SUPERVISORY INFO	ORMATION
Immediate Supervisor's Nan	ne:
Title:	
COMPLAINT INFOR	MATION
1. Your complaint of Sexual	Harassment is made against:
Name:	Title:

	Work Address:	Work Phone:
Rela	tionship to you (please select or	ne):
□Su	pervisor □Subordinate □Co	-Worker $\square$ Other
1.	complaint and your reasons for	incident(s) that is the basis of this concluding that the conduct is sexitional sheets of paper if necessary ents or evidence.
2.	Date(s) sexual harassment occi	urred:
3.	Is the sexual harassment contin	nuing?   Yes   No
4.		et information of any witnesses or rmation related to your complaint:
***T	_	l, but may help facilitate the investi-
wr	Have you previously complained itten) about sexual harassment at l whom did you complain or provid	Five Towns College? If yes, when and

Employees that file complaints with their employer might have the ability to get help or file claims with other entities including federal, state or local government agencies or in certain courts.		
6. Have you filed a claim regarding this complaint with a federal, state or local government agency? ☐ Yes ☐No		
7. Have you instituted a legal suit or court action regarding this complaint? ☐ Yes ☐No		
8. Have you hired an attorney with respect to this complaint?		
□ Yes □No		
I request that Five Towns College investigate this complaint of sexual harassment according to its stated policies and procedures, and advise me of the results of the investigation.		
Signature: Date:		