

CHATHAM CENTRAL SCHOOL DISTRICT

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 _____
