

Tougaloo College
Title IX Sexual Misconduct Office

Formal Complaint of Sexual Misconduct

IMPORTANT: This form is used to submit a formal complaint of misconduct to the university. Sexual misconduct includes rape, sexual assault, sexual harassment, sexual exploitation, stalking, and dating or domestic violence. This form may be used by students or employees, or by any other person who experiences sexual misconduct on campus or in connection with a university program or activity.

A formal complaint must be submitted before TC will begin an investigation of sexual misconduct. Once submitted, the Title IX Coordinator will inform all parties that a formal complaint has been filed, will explain their rights under university policies, and will open a formal investigation.

A formal complaint is **not** required to obtain supportive measures such as changes to class schedules or living accommodations, no contact orders, referral to counseling or advocacy, or excused absences. Supportive measures are available irrespective of whether a complaint is filed and may continue as needed regardless of the outcome of a formal investigation.

Reporting Person's Identifying Information

Full Name: _____ Telephone: _____

Address: _____

TC ID (if applicable): _____ TC or other email: _____

What is your relationship to Tougaloo College?

- ☐ **Student** ☐ **Employee** - Position/department: _____
- ☐ **Participant in TC Program** - Please describe: _____
- ☐ **Guest or other** – Please describe: _____

Description of Misconduct

1. Name(s) of the person(s) who committed sexual misconduct, if known:

2. Name(s) of the victim(s), if different than the person submitting this report:

3. Please describe what happened. When possible, please include specific names, dates, times, locations, witnesses and other pertinent information: (attach additional sheets as necessary)

4. Do you have any contact information (cell phone number, email address, physical address, etc.) for the person or persons who committed the offense? If so, please list them here.

5. Are there any witnesses to what happened? If so, please list names and any contact information you may know:

6. Are there any documents, recordings, photographs, emails, text messages that may contain information about what happened? Are there any physical objects, such as clothes or sheets, that might provide information? If so, please describe them here:

Additional Information for Reporting Person

It is important that you are aware of key provisions of the University's Sexual Misconduct Policy. Please review the following and initial to indicate that each statement is correct.

_____ I have been provided with a copy of the University's Sexual Misconduct Policy.

I understand that when I submit this complaint, the University will conduct a formal investigation of the reported conduct.

_____ I understand that the information I provide to the University in this report and any subsequent conversations or exchanges is considered private but is not confidential. The University may be required to disclose certain information to adequately investigate.

_____ I understand that the accused person(s) will be informed of this report, will be informed of their rights under TC policies, and will be informed that retaliation of any kind will not be tolerated.

_____ I have been informed of my right to file a criminal complaint with a law enforcement agency.

_____ I have been informed that the University offers supportive measures that include counseling, extensions of deadlines or other course-related adjustments, modifications of work or class schedules, providing an escort or other security, mutual orders mandating no contact between individuals, changes in housing or work locations, leaves of absence, monitoring of certain areas, or other similar measures, as the University deems appropriate. I understand that these are available irrespective of whether a formal complaint is filed.

_____ I understand that I can seek supportive measures by communicating that request to the Title IX Coordinator.

_____ I understand that I have the right to be accompanied to any meeting or hearing in this process by an advisor of my choosing, who may be but is not required to be an attorney. I understand that the university will appoint an advisor at no charge upon written request from me.

_____ I understand that, should I decide not to proceed with formal charges against the accused, the University will carefully consider that request. I also understand that, in some instances, the University may be required to proceed despite that request in the interest of safety.

Certification

I certify that the information I have provided in this report is true and correct to the best of my knowledge.

Name

Date

To Be Completed by University Personnel

Person Receiving Report: _____ **Date and Time:** _____

Date and Time Received by Title IX Sexual Misconduct Office: _____

OCI Matter No. _____ **Assigned To:** _____

(OCI = On Campus Interviews/Intervention)

