

General Report of Sexual Harassment (Form)



NOTE: Individuals may report and choose to remain anonymous. In such cases, no signature is necessary OR this form can be filled out by a district employee and submitted. Please submit this to the Title IX Coordinator, Courtney Woods (cwoods@gcboe.us).

Submitting this form is distinct from submitting a formal complaint as it will not result in the beginning of the grievance process.

Name of Person Reporting: _____

Email address: _____ Phone Number: _____

Location(s), date(s), and time(s) of incident(s) (if unknown, provide approximate timeframes):

Nature of the Incident: _____

Name of Witness (if any): _____

Please provide any additional relevant information: _____

Name or identity of the individual(s) alleged to have committed the misconduct: _____

Relationship to reporting individual (please circle or list other):

Student

Boyfriend/girlfriend

Staff

Other: _____

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Incident Reported By: _____ Date: _____

I understand that, by providing this information, I am not initiating a complaint under the District’s formal complaint process. I also understand that, if I choose to remain anonymous, the District will not know who I am, and this may limit its ability to respond to the incident I am reporting.

Signature of Reporter

Date