BEVERLY PUBLIC SCHOOLS

Sexual Discrimination/Harassment Reporting Form

Sexual harassment, including sexual violence, is unlawful sex discrimination. Any person may report sex discrimination, including sexual harassment in person, by mail, by telephone, or by electronic mail, to: <a href="mailto:Dr.André Morgan, Title IX Coordinator, Beverly Public Schools, 70 Balch Street, Beverly MA 01915, (978) 921-6100, Ext. 21745, amorgan@beverlyschools.org. Use this form to report sex discrimination or sexual harassment. Assistance is available from the Title IX Coordinator if you need help completing this form.

| Name of Reporter/Person Filing the r | eport: | | | | |
|--|-----------------------|---------------|---------------------|------------|--|
| Circle whether you are a: Student | Staff Member | Parent | Administrator | Other | |
| If you are a student, your school name | e: | | Your g | grade: | |
| If you are a staff member, your school name or work site: | | | Your r | Your role: | |
| Your address and telephone number is | f not a student or en | nployee: | | | |
| Name of Person you alleged discrimin | nated/ harassed you | 1: | | | |
| Circle whether that person is a: Stude | ent Staff Mem | ber Par | ent Administr | ator Other | |
| Date(s) and time(s) of alleged discrimination or harassment: | | | | | |
| Location of alleged discrimination or | harassment: | | | | |
| Witnesses (people who saw the incide Name: Name: Name: | ent or have informa | tion about it |) | | |
| Please provide a detailed description Describe include the details of the include ach person did and said, including sp | eident (including na | mes of peop | | | |
| Signature of Person Filling out Report: | | | Date: | | |
| FOR | R ADMINISTRAT | IVE USE O | NLY | | |
| Form Given to/Received by: | | | Positio | Position: | |
| Circle how was report received: in | person, by mail, | by telepho | one, or by electron | nic mail | |
| Signature: | | | | | |

Date Received: