

## **Title IX Sexual Harassment Formal Complaint Form**

General Statement Regarding Sexual Harassment Complaints and Investigations:

New Brunswick Theological Seminary (NBTS) is committed to the prompt resolution of complaints in a manner consistent with the Seminary's Title IX Policy. The NBTS Title IX Coordinator's role is to assist those active members of the Seminary community who believe they have been sexually harassed or discriminated against by another active member of the NBTS community (e.g., a current student or employee, or potential student or employee). Additionally, when clearly reasonable, the Title IX Coordinator may file on behalf of an alleged victim.

All members of the NBTS community are entitled to report allegations to the police and do not need to wait until NBTS's process and investigation are complete before reaching out to local law enforcement (i.e., processes may work simultaneously). It is important to understand that the Seminary strongly supports confidentiality in accordance with Title IX and the Clery Act; however, there may be exceptions permissible by law. Further, the filing of a formal complaint does require disclosure and notice to the other party. NBTS will maintain as confidential any supportive and/or protective measures provided, to the extent that maintaining such confidentiality will not impair the ability of NBTS to provide supportive measures.

Given the sensitive nature of reports of sexual discrimination or harassment, NBTS shall ensure that all information is maintained in a secure manner. The following information must be completed by the Complainant or the Title IX Coordinator (or Designee).

Complainant Information (the person who is alleged to be the victim of	sexual harassment or sexual discrimination)
Complainant (Check One): Student Faculty Staff Membe	er Other
Complainant Name:	
Complainant Program/Dept.:	Location: NJ Online Other
Complainant Email:	Complainant Phone:
Respondent Information (the person who is alleged to be the perpetrate	or of sexual harassment or sexual discrimination)
Respondent is (Check One): Student Faculty Staff Member	Other
Respondent Name:	
Respondent Program/Dept.:	Location: NJ Online Other
Respondent Email:	Respondent Phone:
Incident Information	
Date(s) of Incident(s):	
Location of Incident(s):	
Type of Alleged Title IX violation (Check One): ☐ Sexual Harassr	ment □ Sexual Discrimination

Please provide a detailed statement of the events, including dates, places, attach additional pages if necessary. Provide any additional documentation	
Have you (complainant) contacted anyone else for help regarding this com	plaint? □ YES □ NO
If so, please provide their name, title, and date they were contacted:	
Have you (complainant) notified law enforcement officials regarding this cla	aim? 🗆 YES 🗆 NO
If so, which agency(s), who is your contact person there, and what is the a	ction status with the agency(s)?
Acknowledgement	
By signing below, I am requesting that NBTS investigate the allegations de information provided in this document is truthful and is not knowingly false	
Complainant Signature:	Date:
Person Taking Report (if applicable):	Position:
Signature:	
Acknowledgement Title IX Coordinator:	
Signature	Date Received:
Information provided to parties: □ Complainant □ Respondent Information on the grievance process, including informal resolution Information on supportive and/or protective measures Policy asserting the respondent is presumed not responsible for the all regarding responsibility is made at the conclusion of the grievance process.	eged conduct and a determination

Both parties have the right to inspect and review evidence

Both parties may have an advisor of their choice, who may be, but is not required to be, an attorney.