

SEXUAL HARASSMENT COMPLAINT FORM

Name: _____ Facility: _____

Job Title: _____ Work Phone: _____

Home Phone: _____ Date: _____

Please complete the form below. Space has been provided to answer the questions. Please attach additional sheets in the case where the space provided is not large enough. After completing the form, submit it to the facility's EEO Officer or Human Resources Director, or to the Human Resources Administrator or Chief Operating Officer at Central Office in Baton Rouge.

WRITTEN REQUIREMENT – This form meets the requirement to report sexual harassment incident(s) in writing.

CONFIDENTIALITY – Steps will be taken to ensure the confidentiality to the greatest extent possible of all information provided on this form. Employees complaining of or reporting sexual harassment will not be subjected to retaliation of any kind. LSUHSC-HCSD prohibits any form of retaliation against any employee for filing a bona fide complaint under the policy or for assisting in a complaint investigation.

FALSE REPORTING – If after investigating any complaint of harassment, it has been determined that the employee has provided false information regarding the complaint, then disciplinary action will be taken against the individual who filed the false complaint or gave the false information.

PLEASE REMEMBER TO SIGN AND DATE THIS FORM

Who committed the alleged harassment?

Is the person who allegedly harassed you in a supervisory position over you?

When did the incident occur? Is it ongoing?

SEXUAL HARASSMENT COMPLAINT FORM

How often did/does the incident occur?

What exactly occurred or was said?

How did it affect you? Has your job been affected in any way? If so, how?

How did you react?

SEXUAL HARASSMENT COMPLAINT FORM

What response did you make when the incident occurred or afterwards?

Are there any persons who have information about this matter? Was anyone present when the alleged harassment occurred? Did you tell anyone about it? Did anyone see you immediately after episodes of alleged harassment?

Did the person who allegedly harassed you harass anyone else? Do you know whether anyone complained about harassment by that person?

Are there any notes, physical evidence, or other documentation regarding the incident?

How would you like to see the situation resolved?

Signature: _____

Date: _____