

The University of Iowa
Office of Equal Opportunity and Diversity
CONFIDENTIAL REPORT OF INFORMAL* ANTI-HARASSMENT COMPLAINT RESOLUTION
Please complete this form and submit it to the Office of Equal Opportunity and Diversity, 202 Jessup Hall,
As soon as reasonably possible after resolution of the complaint
Due to confidentiality considerations, please do not e-mail these forms.

| | |
|-------------------------|--------------------------------|
| Date of Incident | Date complaint received |
|-------------------------|--------------------------------|

| | | |
|---|-------------------|---------------------------|
| College/Organizational Unit | Department | Today's Date |
| Name of Individual Completing Report | Title | Campus Telephone # |

Consistent with the UI Policy on Sexual Harassment, if the person charged in the complaint has been informed of the existence of the complaint, all parties' names shall be disclosed; if the person charged has not been informed of the existence of the complaint, the parties' names shall not be disclosed.

| | |
|--|---|
| Name of Complainant(s) | |
| Department | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown |
| Status of Complaint(s): <input type="checkbox"/> Academic or Administrative Officer <input type="checkbox"/> Faculty <input type="checkbox"/> Professional & Scientific <input type="checkbox"/> Merit <input type="checkbox"/> Student Employee <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student <input type="checkbox"/> Job Applicant <input type="checkbox"/> Former Employee <input type="checkbox"/> No current University affiliation <input type="checkbox"/> Graduate Assistant <input type="checkbox"/> Other _____ | |
| Ethnicity of Complainant(s): <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> White, not of Hispanic Origin <input type="checkbox"/> African American and Black, not of Hispanic Origin <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Latino or Hispanic | |

| | |
|---|---|
| Name of Victim(s) (if other than Complainant) | |
| Department | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown |
| Status of Victim(s): <input type="checkbox"/> Academic or Administrative Officer <input type="checkbox"/> Faculty <input type="checkbox"/> Professional & Scientific <input type="checkbox"/> Merit <input type="checkbox"/> Student Employee <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student <input type="checkbox"/> Job Applicant <input type="checkbox"/> Former Employee <input type="checkbox"/> No current University affiliation <input type="checkbox"/> Graduate Assistant <input type="checkbox"/> Other _____ | |
| Ethnicity of Victim(s): <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> White, not of Hispanic Origin <input type="checkbox"/> African American and Black, not of Hispanic Origin <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Latino or Hispanic | |

| | |
|---|---|
| Name of Respondent(s) | |
| Department | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown |
| Status of Respondent(s): <input type="checkbox"/> Academic or Administrative Officer <input type="checkbox"/> Faculty <input type="checkbox"/> Professional & Scientific <input type="checkbox"/> Merit <input type="checkbox"/> Student Employee <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student <input type="checkbox"/> Job Applicant <input type="checkbox"/> Former Employee <input type="checkbox"/> No current University affiliation <input type="checkbox"/> Graduate Assistant <input type="checkbox"/> Other _____ | |
| Ethnicity of Respondent(s): <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> White, not of Hispanic Origin <input type="checkbox"/> African American and Black, not of Hispanic Origin <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Latino or Hispanic | |

DEFINITION: The University's Anti-Harassment Policy defines harassment as follows:

- a. Definition of harassment as it relates to conduct. "Harassment" means intentional conduct directed toward an identifiable person or persons that is sufficiently severe, pervasive, or persistent that it interferes with work, educational performance, on-campus living, or participation in a University activity on- or off-campus.
- b. Definition of harassment as it relates to the content of speech. When an allegation of harassment rests upon the content of oral, written, or symbolic speech, it falls within this definition only if 1) the content consists of those personally abusive epithets which are inherently likely to provoke a violent reaction, 2) the content is a serious expression of an intent to commit an act of unlawful violence to a particular individual or group of individuals, or 3) the content is a threat to a person or group of persons with the intent of placing the victim in fear of bodily harm or death. Conduct that constitutes a protected exercise of an individual's rights under the First Amendment to the United States Constitution (and related principles of academic freedom) shall not be deemed a violation of this policy.

For the purposes of this form, "informational complaints" are those handled by department or units outside the Office of Equal Opportunity and Diversity. Pursuant to the UI Anti-Harassment Policy, any academic or administrative officer who becomes aware of allegations of protected class harassment by any means **must** consult with the Office of Equal Opportunity and Diversity regarding appropriate steps.

Forms of Harassment: (check all forms of unwelcome behavior that apply)

| | | |
|--|---|--|
| <input type="checkbox"/> Verbal Harassment | <input type="checkbox"/> Physical Harassment | <input type="checkbox"/> Visual Harassment |
| <input type="checkbox"/> racial/ethnic epithets <input type="checkbox"/> Inappropriate jokes <input type="checkbox"/> derogatory comments related to protected class status <input type="checkbox"/> verbal threats <input type="checkbox"/> other (explain) | <input type="checkbox"/> unwelcome contact <input type="checkbox"/> physical gestures <input type="checkbox"/> stalking <input type="checkbox"/> assault <input type="checkbox"/> other (explain) | <input type="checkbox"/> written <input type="checkbox"/> pictures/photos <input type="checkbox"/> posters <input type="checkbox"/> electronic/computer <input type="checkbox"/> other (explain) |
| <input type="checkbox"/> Conditioning employment or educational benefits on submitting to unwelcome requests | <input type="checkbox"/> retaliation for complaining about harassment | <input type="checkbox"/> Other (explain) |

Please provide summary of the nature of the allegations below (attach additional pages if necessary):

Outcome (check only one):

| | | |
|--|--|---|
| <input type="checkbox"/> Founded | <input type="checkbox"/> unfounded | <input type="checkbox"/> resolved/negotiated settlement |
| <input type="checkbox"/> complaint pending | <input type="checkbox"/> complaint withdrawn | <input type="checkbox"/> referred to another office |
| <input type="checkbox"/> Other | | |

Discipline (check all that apply):

| | | |
|--|--|---------------------------------------|
| <input type="checkbox"/> apology | <input type="checkbox"/> educational program | <input type="checkbox"/> counseling |
| <input type="checkbox"/> verbal reprimand | <input type="checkbox"/> written reprimand | <input type="checkbox"/> reassignment |
| <input type="checkbox"/> suspension | <input type="checkbox"/> no contact order | <input type="checkbox"/> termination |
| <input type="checkbox"/> other (explain) | | |
| <input type="checkbox"/> sanctions applied under the Code of Student Life** (explain) | | |

*To your knowledge, has this complaint been referred to another office? Yes No If yes, please indicate where:
 Office of Equal Opportunity and Diversity Office of Student Services other (specify)

** For Office of Student Services use only: Date report Completed

**Please return this form to the Office of Equal Opportunity and Diversity, 202 Jessup Hall.
 Due to confidentiality considerations, please do not e-mail these forms.
 Thank you for your assistance in resolving the complaint.**