

The University of Iowa
Office of Equal Opportunity and Diversity
CONFIDENTIAL REPORT OF INFORMAL* SEXUAL 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
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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 Policy on Sexual Harassment defines sexual harassment as persistent, repetitive or egregious conduct directed at a specific individual or group of individuals that a reasonable person would interpret, in the full context in which the conduct occurs, as harassment of a sexual nature, when:

1. submission to such conduct is made or threatened to be made explicitly or implicitly a term or condition of an individual's employment, education, on campus living environment, or participation in a University activity;
2. submission to or rejection of such conduct is used or threatened to be used as a basis for a decision affecting an individual employment, education, on-campus living environment, or participation in a University activity; or
3. such conduct has the purpose or effect of unreasonably interfering with work or educational performance, or of creating an intimidating or offensive environment for employment, education, on-campus living, or participation in a University activity.

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 Policy on Sexual Harassment, any academic or administrative officer who becomes aware of allegations of sexual harassment by any means **must** consult with the Office of Equal Opportunity and Diversity regarding appropriate steps.

Forms of Sexual 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"/> comments of a sexual nature <input type="checkbox"/> unwelcome advances <input type="checkbox"/> derogatory sex based comments <input type="checkbox"/> verbal threats <input type="checkbox"/> other (explain)	<input type="checkbox"/> unwelcome contact <input type="checkbox"/> physical gestures <input type="checkbox"/> exhibitionism <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 sexual requests	<input type="checkbox"/> retaliation for complaining about sexual harassment	<input type="checkbox"/> Other (explain)

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

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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.**