

## Sexual Misconduct Complaint Form

Durham Tech is fully committed to providing programs, activities, and an educational environment free from sexual discrimination. Should an employee or student feel his/her rights under Title IX have been violated, he/she may use this form to submit an illegal discrimination or sexual misconduct. Complaints may be emailed to Angela Davis, the Title IX Coordinator at [davisa@durhamtech.edu](mailto:davisa@durhamtech.edu) or delivered to ERC (Building 5), room 5-213. You may also contact her directly at 919-536-7250, ext. 6002 if you need assistance.

PROVIDE ALL AVAILABLE INFORMATION

### Contact Information

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Email Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_

Classification (Faculty, Non-Faculty, Student, Other) \_\_\_\_\_

### Complaint Information

(Please provide the following information about the individual(s) you believe committed sexual misconduct, harassed, or retaliated against you. If you do not have all of the information, you may leave fields blank.)

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Department: \_\_\_\_\_ Email Address: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Classification (Faculty, Non-Faculty, Student, other) \_\_\_\_\_

Most recent date of alleged misconduct: \_\_\_\_\_

When did the alleged discriminatory action start: \_\_\_\_\_

Description of events/behaviors/issues that are alleged to be illegal discrimination or sexual misconduct (additional pages or copies of documents/pictures, etc. may be attached, if relevant). Be as specific as possible including the names of any witness, dates, times, locations of alleged events.

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Signature of Person Submitting Form

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Date