

Allegany College of Maryland
STUDENT & LEGAL AFFAIRS

TITLE IX PROCEDURE: REPORT FORM
SEXUAL HARASSMENT & SEX DISCRIMINATION POLICY

If you have experienced sexual harassment or sex discrimination, the College wants to know so we can take appropriate action to stop the behavior, prevent a recurrence, and remedy the effects. You can submit a Report that alerts the College and permits the consideration of multiple options to resolve the situation. Submitting this Report allows the Title IX Coordinator is one way to alert the College of improper conduct that must be addressed. Be sure to review the policy and procedures online at https://www.allegany.edu/title-ix/index.html . Key documents include the Executive Summary, Quick Reference Guide, Definitions, Rights and Responsibilities.

NOTE: Other unlawful discrimination complaints are handled by a different (albeit similar) process.

Directions: Complete this form in its entirety. Attach a typed statement and any supporting documentation. (Incomplete reports may be returned to the submitter for additional info.) Send everything to Dr. Renee Conner, Title IX Coordinator. CC-12 via hand-delivery, postal mail, or email (rconner@allegany.edu) . Monitor your ACM email for a response and next steps. (NOTE: This Report is not a private document if a formal investigation is begun; at that time, the Respondent will be given a copy of the complaint, attachments, future statements, and any other evidence. Likewise, the Parties will be able to see all statements/evidence.)

Your Name: _____
Reports may be submitted anonymously, but please understand that anonymous reports are much more difficult to investigate.

Address: _____

Phone: _____ Email: _____

*If you are a student or employee, provide your ACM email as all college business is conducted via college email only.

- 1. What type of sexual harassment or sex discrimination is being alleged?
Sexual Assault, Sexual Harassment (quid pro quo), Sexual Harassment (hostile environment), Stalking, Relationship Violence, Other sex-based misconduct (eg., sexual exploitation), Gender-based Discrimination, Pregnancy discrimination.
2. Who is the person you are accusing?
3. When did the act(s) occur? Date: ___/___/___ Time: ___:___ am or pm
NOTE: Reports should be made in a timely manner - preferably right after the incident. Delays in reporting hinder the investigation.
4. Where did the act(s) being alleged occur? (ie., specific location):
5. Type and attach a written, detailed statement describing the incident.
6. Are you safe now? Yes / No >> If not, it is extremely important that you notify the police and get to safety!
7. Do you need medical treatment? Yes / No >> If so, it is extremely important that you get the care you need!
8. Do you have any other immediate needs with which you need help? Yes / No >> If so, describe and attach.
9. What do you want to happen next? Be specific with any requests or how you would like this Report to be handled. Your wishes are not determinative but are important. Must be typed.

CERTIFICATION

By signing below, I certify that I have read and completed this report myself. I certify that all contents and any attachments are true and complete. I understand that any inaccurate, misleading, fraudulent, or incomplete information could affect how this matter can be resolved and/or could prompt other appropriate action by the College - including the application of other ACM policies/procedures. I understand that the College reserves the right to request additional documentation. Submitting the report does not dictate any particular resolution or outcome. I have had the opportunity to read the College's policy and procedures.

Signature _____ Date ___/___/___