

Allegany College of Maryland  
**STUDENT & LEGAL AFFAIRS**

**TITLE IX PROCEDURE: REPORT FORM**  
**SEX-BASED HARASSMENT & SEX DISCRIMINATION POLICY**

If you have experienced sex-based 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 . 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 complaints may be returned to the submitter.) Then send everything to Dr. Renee Conner, Title IX Coordinator. CC-12 via hand-delivery, postal mail, or email ([rconner@allegany.edu](mailto:rconner@allegany.edu)). Monitor your ACM email for a response and next steps. 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 Complainant will be given the Respondent's 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?
 

<input type="radio"/> Sexual Assault <input type="radio"/> Sexual Harassment ( <i>quid pro quo</i> ) <input type="radio"/> Sexual Harassment ( <i>hostile environment</i> ) <input type="radio"/> Stalking <input type="radio"/> Relationship Violence	<input type="radio"/> Other sex-based misconduct (eg., sexual exploitation) <input type="radio"/> Gender-based Discrimination <input type="radio"/> Pregnancy discrimination
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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.

**COMPLAINANT 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**