

OFFICE OF DIVERSITY AND EQUITY/ TITLE IX AND COMPLIANCE

COMPLAINT FORM

Name of Complainant:		A
Street Address:		
City and State:		ZIP Code:
Phone:Er		
Status: Student	Employee	Other (Please specify)
Name of the person(s) you are fi	ling the complaint aga	ainst:
Complaint Summary: (<i>Please us</i> Date(s) of Incident(s):		provide specific details)
Location(s) of Incident(s):		
Summary of Complaint:		
Please check one:		
I understand that this is a for confidential process based of		that will initiate an investigation into my allegations. It is a
I do not want a formal inves	tigation into my alleg	ations and want the incident kept as a private, confidential matter.
(Signature Required)		(Date)

Rowan College of South Jersey reserves the right to proceed with an investigation without a formal complaint if it deems necessary. This decision will be made on a case-by-case basis.

List the names of all known or potential witnesses. Please prostudents if you can.	vide contact information for non-College employees and			
How would you like to see this situation resolved?				
Have you informed any other college employee in another department about your complaint? If yes, please identify the individual(s).				
Return this form to Gloucester Campus: Almarie J. Jones, ajones@rcsj.edu Special Assistant to the President,	Cumberland Campus: Nathaniel Alridge, Jr., J.D., nalridge@cc.rcsj.edu Director, Diversity and Equity/Title IX			
Diversity and Equity/Title IX and Compliance College Center, Room 116, 856-415-2154	and Judicial Affairs Academic Building, 2 nd floor, 856-691-8600, ext.1414			
For Use by the Title IX Officer Only				
Type of Complaint Bullying/Intimidation Discriminati Sexual Misconduct Stalking	on Harassment Retaliation			
Basis of the Complaint of Bias/Discimination				
Accompanied by a Service Dog Age	AIDS/HIV			
Atypical heredity cellular or blood trait Citizenship status Disability (past or present physical or mental)				
Gender Identity Genetic information M	arital Status (includes civil union or domestic partnership)			
Military Service National Origin Ra	ce/Color Religion			
Sex (including pregnancy, childbirth and related medical conditions)				
Sexual Orientation (includes affectional orientation and perceived sexual orientation) Unemployed status				

Revised: 09-2019

____ Other: (Please specify)