

CONFIDENTIAL



SEXUAL VIOLENCE COMPLAINT FORM (including threats of sexual violence)

Use this form to report a complaint of threats of sexual violence or incident(s) of sexual violence that you believe violates the school's Prevention of Sexual Violence Policy. The option to make a disclosure as per policy, to a member of the school community is also available which allows you to receive the appropriate support & referrals to community services if you do not wish to make a report.

Complainant & Respondent Information	
Name of Complainant (you):	
Student ID#:	
Pronouns (They / She / He etc.):	
Complainant Department / Program:	
Preferred method of communication:	
E-mail Address:	
Contact Telephone Number:	
Relationship to Respondent (if any)	
Name of Respondent(s): (the person(s) you are making a complaint against)	
Respondent Department / Program (if known):	
Respondent contact details (if known):	

PLEASE NOTE: As a complainant you have a choice NOT to participate in an investigation. Investigations are conducted by an appropriate, designated university/school official.

