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ERIE 1 BOCES COMPLAINT FORM FOR SEXUAL HARASSMENT IN THE WORKPLACE

If you believe that you have been subjected to sexual harassment or gender discrimination, you are encouraged, but not required, to complete this form and submit it to the Civil Rights Compliance Officer (CRCO). No employee will be retaliated against for filing a complaint. Questions regarding the completion or submission of this form can be directed to the BOCES' CRCO or a trusted staff member with whom you feel comfortable.

If you are more comfortable reporting verbally or in another manner, the person to whom you report the sexual harassment should complete this form, provide you with a copy, and follow its sexual harassment prevention policy by investigating the claims as outlined at the end of this form.

For additional resources, visit: ny.gov/programs/combating-sexual-harassment-workplace

COMPLAINANT INFORMATION

Nar	ne:			
Wo	rk Address:			Work Phone:
Job	Title:			Email:
Sele	ected Preferred Commun	ication Method: [] Email	[] Phone [] In person
SUI	PERVISORY INFORM	IATION		
Imn	nediate Supervisor's Nan	ne:		
Titl	e:			
				ss:
CO	MPLAINT INFORMA	TION		
1)	Your complaint of sexual harassment is made about:			
	Name:			Title:
	Work Address:			Work Phone:
	Relationship to you:	[] Supervisor [] S	upervised	e [] Co-Worker
		[] Other (please spec	ify)	
		(Con	tinued)	

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ERIE 1 BOCES COMPLAINT FORM FOR SEXUAL HARASSMENT IN THE WORKPLACE (Cont'd.)

Please describe what happened and include as many details as possible. You may use additional 2) sheets of paper if necessary. If you have any relevant documents, please include them.

3) Date(s) sexual harassment occurred:

Is the sexual harassment continuing?	[] Yes	[] No
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If possible, please list the name and contact information of any witnesses or individuals who may 4) have information related to your complaint:

The last question is optional, but may help the investigation.

5) Have you previously provided information (verbal or written) about this or related incidents? If ves, when and to whom did you provide information?

This is not required, but if you have retained legal counsel and would like the BOCES to work with them, please provide their name and contact information.

Signature: _____ Date: _____

(Continued)

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ERIE 1 BOCES COMPLAINT FORM FOR SEXUAL HARASSMENT IN THE WORKPLACE (Cont'd.)

Instructions for the BOCES

After receiving a complaint about alleged sexual harassment, follow the BOCES' sexual harassment prevention policies and procedures.

Generally, an investigation involves:

- 1) Speaking with the employee;
- 2) Speaking with the alleged harasser;
- 3) Interviewing witnesses; and
- 4) Collecting and reviewing any related documents.

While the process may vary from case to case, all allegations should be investigated promptly and resolved as quickly as possible. The investigation should be kept confidential to the extent possible.

Sexual harassment occurs on a spectrum and employers are encouraged to view all potential allegations with an open mind. Disciplinary action should meet the severity of the alleged actions.

The BOCES will document the findings of the investigation and the basis for the BOCES' decision along with any corrective actions taken. The BOCES will notify the complainant and the individual(s) against whom the complaint was made of the investigation's outcome and, as appropriate, corrective actions taken. This may be done via email.