

Auburn University Complaint Form

for

Sexual Harassment, Sexual Assault, Intimate Partner Violence, Stalking, or Other Sexual Misconduct

This form is to be completed by victims of the above stated types of behavior who wish to initiate a formal investigation by the Title IX Office. This form may be completed by any person whether they be a member of the Auburn University community or not, who has experienced sexual harassment, sexual assault, intimate partner violence, stalking, sexual exploitation, or other types of sexual misconduct. These behaviors may constitute a violation of the University's Title IX Policy or the Policy Against Discrimination and Harassment. Please complete the form to the best of your ability. ***If you are filing an initial report, please use the Incident Reporting Form located on the Title IX webpage.***

Today's Date: _____

Name: _____

Banner ID: _____

Phone Number: _____

E-mail: _____

Preferred Method of Contact:

Phone E-mail Text Message Other: _____

AU Affiliation:

Undergraduate Student Graduate Student Faculty Staff Alumni Guest

Incident Date: _____

Incident Time: _____

Incident Location:

- Campus Building
- Campus Outdoors
- Organization House
- Off Campus
- AU Sponsored Event

Type of Incident:

- Sexual Harassment
- Sexual Assault
- Intimate Partner Violence
- Stalking
- Other: _____

Specific Location:

Individual who committed the alleged conduct:

Their AU Affiliation:

Student Faculty Staff Alumni Guest Other _____

In the space provided, please provide a brief narrative of what occurred. If you have physical evidence supporting the alleged conduct, please state what type of evidence it is, i.e. text messages, photos, social media posts, etc, and what the evidence shows.

Signature: _____

Date: _____

