August 2020

OEO Formal Complaint Form or file on Ethicspoint

Please complete this form with as much detail as possible. You will be able to add details in the course of an interview if you wish to pursue a formal investigation. You may also file this electronically by using the Tufts University third party reporting tool, Ethicspoint (which has an anonymous reporting option. See Explanation of Options. Should you decide to use this form, you may attach a narrative of your complaint to this form and send it the Title IX Coordinator Jill Zellmer at Jill.Zellmer@tufts.edu or oeo@tufts.edu. At a minimum, please include the following, if known:

Basic Personal Information

Your Name: ________________________________
Contact Information: Email address: ________________________________
Telephone: ________________________________
☐ Check here if you prefer to receive emails instead of calls. OEO staff will not text you.

Affiliation with Tufts:

☐ Undergraduate Student
☐ Graduate Student
☐ Staff
☐ Faculty
☐ Tufts Affiliate
☐ Non-Tufts Affiliates
☐ Other: please explain ________________________

If you are a student or faculty select your:
Fletcher ☐ A&S ☐ SOE ☐
Cummings ☐ TUSM ☐ TUSD ☐
Tisch College ☐ PHPD ☐ SMFA ☐
HNRCA ☐ Biomedical Sciences ☐
GSAS ☐

If staff, indicate your department:
_____________________________________

Information about the Incident:

Date of Incident: __________________________ Time of Incident: __________________________
Place of Incident: ________________________________
☐ On Campus ☐ Off Campus
☐ At Tufts Sponsored Event ☐ Abroad/Not in the United States
Type of Misconduct:

☐ Discrimination or Harassment
   _____ Race/Color  _____ National Origin/Ethnicity
   _____ Sexual Orientation  _____ Gender Identity/Expression
   _____ Age (40+ years of age only)  _____ Religion
   _____ Sex/Gender  _____ Disability
   _____ Other: ______________________

☐ Sexual Misconduct
   _____ Sexual Harassment (unwelcome comments or physical contact of a sexual nature)
   _____ Sexual Assault (unconsented touching)
   _____ Sexual Exploitation (unconsented watching, recording, exposing, inducing intoxication)
   _____ Stalking (causing fear, distress, alarm because someone is following or seeking you either in person or using electronic means)
   _____ Relationship Violence (intentionally controlling behavior – covers relatives, friends, roommates and/or those in an intimate or domestic relationship)
   _____ Domestic Violence
   _____ Sex/Gender Discrimination

☐ Retaliation
Please describe your prior participation in an OEO matter, indicating if you were a party (complainant or respondent) and how this relates to the retaliation: ______________________
____________________________________________________
____________________________________________________
____________________________________________________

Persons Involved:

Respondent (the person who committed the misconduct): ______________________
____________________________________________________

Potential Witnesses and how to reach them (if known):

____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________
Respondent’s Affiliation with Tufts University:

☐ Undergraduate Student
☐ Graduate Student
☐ Staff
☐ Faculty
☐ Tufts Affiliate
☐ Non-Tufts Affiliates
☐ Other: please explain

If you are a student or faculty select:

☐ Fletcher
☐ Cummings
☐ Tisch College
☐ HNRCA
☐ GSAS

If staff, indicate your department:

______________________________

Type of Process Sought:

If known. Please see Explanation of Options and/or ask an OEO staff member if you are unsure or check unsure and an OEO staff member will reach out to you.

☐ Formal Grievance Process (formal interviews, investigation, formal report and adjudication of the matter under university policy and corresponding process, either SMAP or SMAP-X)
☐ Informal Resolution Process (informal resolution of complaint) ~
☐ Unsure, I need more information from an OEO staff member*
☐ I don’t want OEO to do anything except send me resource and support options but I did want my complaint to be counted in OEO’s statistics.

Verification

The Complainant acknowledges and agrees that the information provided in this Complaint is true and accurate to the best of their knowledge. The Complainant further verifies that they have voluntarily provided this information in order to access the Complaint Resolution Process through the Office of Equal Opportunity (OEO).

Name:__________________________________________________________

__________________________________________________________
Signature:                      Date: ______________

~ Informal Resolution Process options can include a general OEO conversation with the respondent about expectations of conduct, a facilitated discussion with you and the respondent, a mutual no-contact order, a mediation, some or all of these options or something else you may request and OEO will consider.

* If you were unsure and after talking to an OEO staff member you would now like to request a formal process, please sign and date here:

__________________________________________________________
Signature

__________________________________________________________
Date of decision to pursue formal process

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