



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

If you are a student or faculty select your:

- Fletcher, Cummings, Tisch College, HNRCA, GSAS, A&S, TUSM, PHPD, Biomedical Sciences, SOE, TUSDM, SMFA

Other: please explain \_\_\_\_\_

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
- \_\_\_\_ Sexual Orientation
- \_\_\_\_ Age (40+ years of age only)
- \_\_\_\_ Sex/Gender
- \_\_\_\_ Other: \_\_\_\_\_

- \_\_\_\_ National Origin/Ethnicity
- \_\_\_\_ Gender Identity/Expression
- \_\_\_\_ Religion
- \_\_\_\_ Disability

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: \_\_\_\_\_

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**Persons Involved:**

Respondent (the person who committed the misconduct): \_\_\_\_\_

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

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**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  A&S  SOE
- Cummings  TUSM  TUSDM
- Tisch College  PHPD  SMFA
- HNRCa  Biomedical Sciences
- 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: \_\_\_\_\_  
Please print or write legibly

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