



TEXAS STATE TECHNICAL COLLEGE
Grievance/Complaint Form

Texas State Technical College is committed to prompt resolution of complaints in a manner consistent with our policies. You do not have to use this form to receive assistance; however, this form will be used so that we can be certain that all necessary steps for a resolution have been completed. This form is to be used for reporting to the Title IX Coordinator. Please feel free to attach additional sheets of information if you believe they are necessary. In addition, please provide any documentation in support of your claim. Please print clearly.

If you believe you have been sexually assaulted or harassed by any member of the College community or while participating in a college sponsored activity, you are encouraged to bring your complaint to the attention of the Title IX Coordinator and/or other College official. If you would like to initiate a criminal investigation of a sexual assault, contact the TSTC Campus Police Department.

This form and any attachments can be submitted to the campus Title IX Coordinator's Office. Please allow a minimum of 24 hours for review and for Title IX eligibility determination.

Complainant (Person filing the complaint)

Name: _____

Student: _____ Employee: _____ Both: _____

Department: _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

Address: _____

City Zip Code: _____

Email Address: _____

Where do you prefer to be contacted? Work _____ Home _____

Name of Respondent (Individual complaint is against)

Name _____

Student: _____ Employee: _____ Both: _____

Department: _____

Work Phone: _____ Home Phone: _____ Cell Phone _____

Address: _____

City Zip Code: _____

Email Address: _____

Was the alleged discrimination with regard to your rights in:

Employment: _____ Education: _____ Retaliation: _____

Was the alleged discrimination due to your:

Race: _____ Color: _____ National Origin: _____

Religion: _____ Age: _____ Sex (Gender) _____

Disability: _____ Veterans Status: _____ Sex Orientation: _____

*Sexual Harassment: _____

**If you selected sexual harassment, please fill out the section below titled Sexual Harassment Questionnaire.*

SEXUAL HARASSMENT QUESTIONNAIRE – which of the following of two types of sexual harassment does your complaint fall under?

a. **QUID PRO QUO** – Latin word that means “this for that”. This harassment involves threats and rewards as a condition of employment or education for failing to accept or reject someone’s sexual advances. For example: No sex, no job.

YES _____ NO _____ Other _____

b. **HOSTILE WORK ENVIRONMENT** - the person(s) being affected must perceive this behavior as abusive. The severity and pervasiveness of the behavior has the ability to create a hostile work and educational environment. Consider: frequency and severity, was behavior physically threatening, humiliating or were there offensive utterances.

YES _____ NO _____ OTHER _____

Date first incident took place: _____ Date of most recent incident: _____

(Explain)

End of sexual harassment questionnaire

GENERAL HARASSMENT – If your complaint is not categorized above, it may not be a form of discrimination. What is your concern? Please provide any documentation in support of your claim.

Explain:

Who have you contacted for help regarding this complaint?

Name _____

Title _____

Date _____

Who else have you told about your complaint?

Name _____

Title _____

Date _____

Name _____

Title _____

Date _____

Date first incident took place: _____

Date of most recent incident: _____

Describe the injury or harm you suffered because of the alleged discrimination. Please attach additional sheets, if you need more space.

INFORMATION TO INDIVIDUAL

Every employee, including student workers and students, has the right to file a complaint. The individual can file their complaint with the campus Human Resource Executive Director, campus Title IX Coordinator, or they have the right to choose to file their complaint with an outside agency. Those agencies are:

EEOC – Equal Employment Opportunity Commission

TWC – Texas Workforce Commission

OCR – Office of Civil Rights

Students who are not employees may also file their complaint with the campus Human Resource Executive Director or campus Title IX Coordinator. Upon review of the submitted form and its incident/complaint, an assessment for the appropriate course of action and/or investigation will be determined.

Statement of events provided by Complainant

Please provide a detailed statement of the events, including dates, places, and names of witnesses. Please attach additional sheets, if you need more space. Please provide any documentation in support of your claim.

REMEDIES SOUGHT BY COMPLAINANT

Texas State Technical College provides for a variety of remedies. However, in many instances, a Respondent will express willingness to settle a charge with some compromise on both parts, therefore, we request you list below things you believe you are entitled to in order to achieve any early resolution to your charge. In other words, what will it take to satisfy you at this point in time, in order to resolve your charge?

Complaint Acknowledgement

I certify that to the best of my knowledge the information that I have provided is accurate and the events and circumstances are as I have described them.

I understand and acknowledge that a copy of this complaint, along with the attachments, will be furnished to the alleged offender/respondent. I also understand and consent to the disclosure of information contained in this complaint to appropriate administrators and witnesses interviewed for the purpose of investigating this complaint. I am willing to cooperate fully in the investigation and provide whatever evidence Texas State Technical College deems relevant.

I understand that the nature of this complaint, correspondence, and all discussions conducted in the course of investigation of the information contained in this complaint are confidential to the extent permitted by law and unauthorized disclosures of information concerning the investigation could result in disciplinary action. I agree to abide by these guidelines.

The investigation of a formal complaint will be concluded as soon as possible after receipt of the written complaint. Upon completion of the investigation, the designee will prepare a written report of the investigation and submit the report to the proper administrator. Reports all evidence submitted are subject to become part of the individual(s) record.

**Upon review of the submitted form and its incident/complaint, an assessment for the appropriate course of action and/or investigation will be determined.*

**For complaints involving a TSTC Police Officer, a written statement must also be submitted to the campus TSTC Police Department (Texas Penal Code Sec. 614.022).*

Signature: _____ Date: _____

**Affirmative Action Statement/Accommodation Statement*

**Alternative Format Statement*