

**BROOKLYN LAW SCHOOL
COMPLAINT FORM
FOR SEXUAL MISCONDUCT AND DISCRIMINATION**

If you believe that you have been subjected to sexual misconduct (which includes sexual harassment) or any form of discrimination, you are encouraged to complete this form and submit it to Louise Cohen, Director of Equal Opportunity and Title IX Coordinator, 250 Joralemon Street, Room 930, Brooklyn, New York, 11201, (718) 780-0377, louise.cohen@brooklaw.edu. You will be protected from retaliation connected with filing a complaint.

If you are more comfortable reporting verbally or in another manner, please contact Ms. Cohen, who can complete this form and provide you with a copy. She will follow the Law School's sexual misconduct and anti-discrimination policies by investigating the claims as outlined in the *Brooklyn Law School Sexual Misconduct Policy and the Brooklyn Law School Policy on Non-Discrimination and Harassment*. Both policies can be found on BLS Connect at <https://blsconnect.brooklaw.edu/administrative/policies/Pages> and the BLS website at www.brooklaw.edu/policies.

COMPLAINANT INFORMATION

Name: _____

Address: _____

Phone: _____

Email: _____

Select Preferred Communication Method: ☐Email ☐Phone ☐In person

STATUS (Please Select One)

Student J.D. Program: Three-Year Two-Year Four-Year

1st year 2nd Year 3rd Year 4th Year

Employee Title: _____

Department: _____ Work Phone: _____

Immediate Supervisor's Name: _____ Ext. _____

Faculty

COMPLAINT INFORMATION

1. Your complaint of Sexual Misconduct and/or Discrimination pertains to:

Name: _____ Title: _____

Address (if known): _____

Work Phone (if known): _____

Email: _____

Relationship to you: ☐ Supervisor ☐ Subordinate ☐ Co-Worker ☐ Student
☐ Faculty ☐ Vendor ☐ Other

2. Please describe what happened and how it is affecting you and your work, academic studies, or participation in a Law School program. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.

3. Date(s) alleged sexual misconduct or discrimination occurred:

Is the conduct continuing? ☐ Yes ☐ No

4. Please list the name and contact information of any witnesses or individuals who may have information related to your complaint:

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

5. Have you previously complained or provided information (verbal or written) about related incidents? If yes, when and to whom did you complain or provide information?

Signature: _____ Date: _____

