

COMPLAINT FORM FOR REPORTING

SEXUAL HARASSMENT

TOWN OF SMITHVILLE

New York State Labor Law requires all employers to adopt a sexual harassment prevention policy that includes a complaint form to report alleged incidents of sexual harassment.

If you believe that you have been subjected to sexual harassment, you are encouraged to complete this form and submit it to the Town Supervisor, Smithville Town Hall, PO Box 217, Smithville Flats, NY 13841; smithtownsuper@gmail.com. The Form can be submitted in person, by mail or email. You will not be retaliated against for filing a complaint.

If you are more comfortable reporting verbally or in another manner, your employer should complete this form, provide you with a copy and follow its sexual harassment prevention policy by investigating the claims as outlined at the end of this form.

For additional resources, visit: ny.gov/programs/combating-sexual-harassment-workplace

COMPLAINANT INFORMATION

Name: _____ Job Title: _____

Work Address: _____ Work Phone: _____

Email: _____

Select Preferred Method of Communication: in person / work phone / email

SUPERVISORY INFORMATION

Immediate Supervisor's Name &
Title: _____

Immediate Supervisor's Work Address &
Phone: _____

COMPLAINT INFORMATION

1. Your complaint of Sexual Harassment is made against:

Name: _____ Title: _____

Work Address: _____ Work Phone: _____

COMPLAINT FORM FOR REPORTING

SEXUAL HARASSMENT

TOWN OF SMITHVILLE

Relationship to you: Supervisor Subordinate Co-Worker Other

2. Please describe what happened and how it is affecting you and your work. Please use additional sheets of paper if necessary and attach any relevant documents _____ or evidence. _____

3. Date(s) sexual harassment occurred: _____

Is the sexual harassment 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? _____

If you have retained legal counsel and would like us to work with them, please provide their contact information _____

Signature _____ Date: _____

INSTRUCTIONS FOR SUPERVISOR

If you receive a complaint about alleged sexual harassment, you must notify the Town Supervisor.