

Title IX Complaint Form

Complainants who seek to file a Complaint of sexual harassment, gender discrimination, or sexual misconduct may choose to use this form, but are not required to do so. A Complaint can be a document or electronic submission that contains the Complainant's physical or digital signature, or otherwise indicates that the Complainant is the person filing the Formal Complaint. Complaints may be submitted to the Title IX Coordinator(s) in person, by mail, or by email, by using the contact information listed below.

<p>Title IX Officer</p> <p>Mrs. Julie King</p> <p>Email: juking@columbiasc.edu</p> <p>Telephone: 803-786-3765 during business hours and 803-786-3333 in the evening and on the weekend</p>

I. Complainant Information

Name: _____

Email Address: _____

Cell Phone: _____

Current Title, Status or Relationship to the Institution (e.g., student, employee, etc.)

Title, Status or Relationship to the Institution at time of incident(s) described in Section II below (if different than current):

II. Factual Information Regarding Complaint

Date(s) of incident: _____

Location(s) of incident(s): _____

Description of incident(s) (please provide as much detail as possible and attach any relevant documents or information; include the name(s) of all parties involved, including any witnesses or other individuals who may have information relating to the incident(s). Please attach additional sheets as necessary:

III. Request for Investigation and Signature

I hereby request that the Title IX Coordinator(s) commence an investigation into the allegations of Sexual Harassment made in this Complaint. I hereby certify that by my signature below, I am the person filing this Complaint.

Complainant Signature

Date