



# Incident Report Form

Complete this form to report an incident or offence that you believe should be brought to the attention of the college administration. This form and any supporting documents may be submitted to Lisa Perez Miller, Title IX Coordinator and Vice President of Students/Enrollment Management in Office 48F, located next to the Switchboard in the Benson Education Center Commons, Pratt campus.

Pratt Community College is committed to providing a safe environment for our students and employees. We commit to ensuring a timely response and resolution of complaints as outlined in our policies. This form will be used for reporting to our Title IX Coordinator and will help ensure that your complaint is handled appropriately. Please provide a brief, but comprehensive outline of your claim and additional documents which also support your claim. Please print clearly.

### **Complainant (person submitting the complaint)**

Name:

Circle the appropriate:    Student    Employee    Both    Other

Phone:

Email:

Address:

City:

State:

Zip Code:

What is your preferred method of contact?    \_\_\_\_\_ Phone    \_\_\_\_\_ Email

### **Respondent (person complaint is against)**

Name:

Circle the appropriate:    Student    Employee    Both    Other \_\_\_\_\_

Phone:

Email:

Address:

City:

State:

Zip Code:

What is your preferred method of contact?    \_\_\_\_\_ Phone    \_\_\_\_\_ Email

**Witness and/or Name(s), address(es), and telephone # of persons involved**

**Who else have you told about your complaint?**

Name & Title/Affiliation

- Cell/email:

Name & Title/Affiliation

- Cell/email:

Name & Title/Affiliation

- Cell/email:

Name & Title/Affiliation

- Cell/email:

**Statement of Event/Describe What Happened**

Date of Incident: \_\_\_\_/\_\_\_\_/\_\_\_\_

Time of Incident: \_\_\_\_:\_\_\_\_ AM/PM (circle one)

Location:

Provide a detailed statement of events, including dates, times, places, and names of witnesses. You may attach additional pages and/or documents if appropriate. Please print clearly, or prepare a Word document and email to [Lisam@prattcc.edu](mailto:Lisam@prattcc.edu).

**Describe Weapons, Instruments, Equipment or Devices Used if Applicable**

**Resolution Sought by Complainant (Provide a brief summary statement)**

**Complaint Acknowledgement**

I certify that, to the best of my knowledge, the information I have provided is accurate. I understand and acknowledge that a copy of the complaint (and supporting documents) will be provided to the respondent (offender). I also understand and consent to the disclosure of this complaint to the appropriate administrators in order to investigate and resolve this complaint. I understand this complaint and all discussions conducted throughout the course of the investigation are confidential to the extent permitted by law. I also understand that any unauthorized disclosures of this information could result in disciplinary action. I understand, and agree to follow these guidelines.

Signature of Complainant:  
*(sending this form via email serves as signature approval)*

Date:

Signature of Title IX Coordinator:

Date

August 9, 2021