



Pleasant Avenue Elementary • Warren Street Elementary • Johnstown Junior-Senior High • The Knox Building

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SEXUAL HARASSMENT REPORT FORM

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 or gender discrimination, you are encouraged, but not required, to complete this form and submit it to Civil Rights Compliance Officers Alicia Koster and Scott Hale. Ms. Koster is located at the GJSD District Office, akoster@johnstownschoools.org, 518-762-4611 and Mr. Hale is located at Johnstown High School, shale@johnstownschoools.org, 518-762-4661. No employee will be retaliated against for filing a complaint. Questions regarding the completion or submission of this form can be directed to the District's CRCO or a trusted staff member with whom you feel comfortable.

If you are more comfortable with reporting verbally or in another manner, the person to whom you report the sexual harassment should complete this form, provide you with a copy and follow its sexual harassment 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 Communication Method: Email Phone In Person

SUPERVISORY INFORMATION

Immediate Supervisor's Name: _____

Title: _____

Work Address: _____

Work Phone: _____

COMPLAINT INFORMATION

1. Your complaint of sexual harassment is made about:

Name: _____

Job Title: _____

Work Address: _____

Work Phone: _____

Relationship to You: Supervisor Supervisee Co-Worker

Other (please specify) _____

2. Please describe what happened and include as many details as possible. You may use additional sheets of paper if necessary. If you have any any relevant documents, please include them.

3. Date(s) sexual harassment occurred: _____

Is the sexual harassment continuing? Yes No

4. If possible, 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 provided information (verbal or written) about this or related incidents? If yes, when and to whom did you provide information?

This is not required, but if you have retained legal counsel and would like the District to work with them, please provide their name and information.

Signature: _____ Date: _____

Instructions for the District

After receiving a complaint about alleged sexual harassment, follow the District's sexual harassment prevention policies and procedures.

Generally, an investigation involves:

1. Speaking with the employee;
2. Speaking with the alleged harasser;
3. Interviewing witnesses; and
4. Collecting and reviewing any related documents.

While the process may vary from case to case, all allegations should be investigated promptly and resolved as quickly as possible. The investigation should be kept confidential to the extent possible.

Sexual harassment occurs on a spectrum and employers are encouraged to view all potential allegations with an open mind. Disciplinary action should meet the severity of the alleged actions.

The District will document the findings of the investigation and the basis for the District's decision along with any corrective actions taken. The District will notify the complainant and the individual(s) against whom the complaint was made of the investigation's outcome and, as appropriate, corrective actions taken. This may be done via email.