

Harassment and Sexual Misconduct Reporting Form

This form is for any student/staff member/visitor of The City College who has experienced any kind of harassment or sexual misconduct where the person causing the harassment or sexual misconduct was a student(s), staff member(s) or visitor(s) of City College.

If you wish to discuss this matter before submitting this form, please email the Student Welfare Officer

Email: sriaz@citycollege.ac.uk

What is Harassment?

Harassment is any unwanted conduct related to a 'protected characteristic' that has the purpose or effect of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment. This conduct can be verbal or nonverbal, physical or sexual. It may be persistent or an isolated incident.

What is Sexual Misconduct?

Sexual Misconduct is misconduct, or unwanted conduct, of a sexual nature. This can be in person, but also through social media, telephone, text, email or letter. Such unwelcome sexual misconduct can create an environment which is intimidating or humiliating and can be verbal, non-verbal or physical. This includes the use of a position of power to use coercion for inappropriate sexual behaviour, inappropriate language, or predatory behaviour. Anyone can be a victim of sexual misconduct, regardless of either their gender, or the gender of the person harassing them.

Submit your form to the Student Welfare Officer (should you wish to report anonymously, please choose this option)

- You will receive an email within 7 working days offering a meeting to discuss this matter.
- No record of your report will be held on your or other Student(s)/Staff Member(s) file.
- The procedure will not make any findings or decisions about whether the harassment or sexual misconduct has taken place.
- The College can put in place precautionary action while the investigation is underway to prevent contact between you and the person reported.

Your contact details:

Title:	
Name:	
Email:	
Mobile no:	
If college student:	
ID Number:	
Course:	
Start Date of course:	

Name of student(s)/ staff member(s) or visitor(s) being reported:

1. Name: _____
2. Name: _____
3. Name: _____

Name of any witnesses to the behaviour being reported:

1. Name: _____
2. Name: _____
3. Name: _____

Please do not contact these witnesses yourself, but add contact details (if known) if those listed are not a student/staff member at the City College.

Has this behaviour been reported elsewhere (ie to the police?)

Yes/No

Please give a brief description of what took place, including date(s) and any evidence that you may have:

What outcome would you like to happen as a result of this report (you can leave this blank if you prefer):

Statement:

I consent to the information in this statement being shared with others in the College, where necessary, for the purpose of investigation.	
I understand that the College will provide details of this form, and any evidence, to the person that has been reported in this form. I understand that I will be informed of when this will happen and that there will be a meeting with myself before this happens.	
I confirm that the information given is true, correct, and complete, to the best of my knowledge.	

Signed: _____ Date: _____

Please submit form to the Student Welfare Officer: Susan Riaz – sriaz@citycollege.ac.uk