Discrimination based on protected characteristics is not tolerated at Goucher College, and formal complaints of discrimination will be investigated in a vigorous and timely manner. The information you provide in this form will be kept as confidential as is reasonably possible, although you should understand that the accused will be provided with a copy of your complaint. You may make this complaint anonymously, but please understand that doing so may impair the college’s ability to conduct an effective investigation. Any questions about this form may be directed to Lucia Perfetti Clark, Goucher’s Title IX Coordinator (lpclark@goucher.edu; 410-337-6570).

Date of this report:_________________________

I have been discriminated against, or I have observed discrimination against another person, based on (circle all that apply):

Race    Color    National Origin    Ethnicity    Sexual Orientation    Gender Identity
Religion    Sex    Age    Disability    Genetic Information

Describe the basis for your claim briefly and include dates (use reverse side of form if necessary):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Name of accused person: ________________________________________________
Name of victim: __________________________________________________________
Your name and contact information (optional):
Name: __________________________________________________________________
Phone: __________________________________________________________________
Email: __________________________________________________________________