

Office of Institutional Equity MSC 3515 New Mexico State University P.O. Box 30001 Las Cruces, NM 88003-8001 575-646-3635 fax: 575-646-2182 equity@nmsu.edu equity.nmsu.edu

Incident Report/Complaint

The Office of Institutional Equity investigates complaints of sexual misconduct and sexual violence, protected class discrimination and harassment, and related retaliation. If you would like to maintain privacy and do not wish OIE to investigate or address the matter, our office must weigh that request against the University's obligation to provide a safe, nondiscriminatory environment for all students, faculty, staff, and visitors. If you provide contact information and OIE staff member will follow up to discuss your options.

This form is designed to provide students, staff, faculty, applicants, visitors, or others with an on-line method to report specific information related to an alleged incident(s) of discrimination, harassment (including sexual misconduct), or retaliation.

Procedure:

You may file a complaint with the Office of Institutional Equity (OIE) in person, by regular mail, or by email. Generally OIE will need all of the information below. To discuss your complaint with a member of OIE, you can schedule a meeting in person, via telephone (575) 646-3635, or email at equity@nmsu.edu before you submit the form online.

Confidentiality and Privacy:

Complaints are confidential and will not be disclosed to anyone who does not have a need to know. This requirement applies to complainants, respondents, witnesses, and any other involved with a complaint. If you believe criminal conduct has occurred, then you should make a criminal complaint to the police. The criminal justice system and this Policy are separate procedures: however, reports must be made under both procedures to ensure that both will go forward. The NMSU Police Department telephone number is **(575) 646-3311**.

COMPLAINANT INFORMATION: All correspondence regarding this report shall be addressed to the contact information listed below.										
*YOUR NAM (First/ Last)	1E					AGGIE ID				
Preferred Name				Preferred Pro				ouns		
ADDRESS:										
CITY:				ST	ATE			ZIP CO	DDE	
CELL PHONE:			W	WORK PHONE:						
*NMSU EMAIL ADDRESSES										
PREFERRED EMAIL ADDRESS										
UNLESS OTHERWISE INSTRUCTED, OIE WILL USE YOUR NMSU EMAIL AS THE OFFICIAL METHOD OF										
COMMUNICATION WITH YOU, ALTHOUGH DURING SUMMER MONTHS OIE MAY SEND DUPLICATE										
COMMUNICATION TO YOUR PERSONAL EMAIL AND/OR MAILING ADDRESS.										

*WITNESSES									
Please provide names of any witnesses.									
*REASONABLE REMEDY REQUESTED									
AFFIRMATION									
*I certify the information provided is true and accurate to the best of my knowledge.									
Agree	Don't Agree								
AFFIRMATION & SIGNATURE									
I understand that submitting this report constitutes official notice to New Mexico State University									
and authorizes the institution to evaluate this conce	rn under University Policy.								
I understand									
Signature	Date								
SUPPORTING DOCUMENTATION									
Pleases attached any type of files to this complaint (Examples: photos, video, and other supporting documents.)									
PLEASE SUBMIT THIS FORM TO THE OFFICE OF INSTITUTIONAL EQUITY AT THE O'LOUGHLIN HOUSE ON UNIVERSITY AVE. ACROSS CHICK FIL A OR VIA EMAIL AT <u>EQUITY@NMSU.EDU</u> .									
HOUSE ON UNIVERSITIAVE. ACROSS CHICK HEA OR VIA LIVIALE AT LOUT TO MISULEDO.									