

BETHANY THEOLOGICAL SEMINARY

SEXUAL MISCONDUCT COMPLAINT

If this is an emergency, call 911.

Under Bethany Theological Seminary's Sexual Misconduct & Sexual Harassment Policy, complainants alleging incidents of sexual misconduct initiate an investigation and grievance process.

Complaints of incidents of **sexual misconduct** as defined in Section III.C. of the Sexual Misconduct & Sexual Harassment Policy will be addressed using **Process B: Sexual Misconduct Complaint Resolution Process**, found in Section VI. of the policy.

IMPORTANT: ONLY THE INDIVIDUAL WHO IS THE ALLEGED VICTIM OF CONDUCT THAT COULD CONSTITUTE SEXUAL MISCONDUCT ("COMPLAINANT") MAY FILE A COMPLAINT.

Filing a formal complaint will initiate **Process B: Sexual Misconduct Complaint Resolution Process**, which requires notifying the respondent of the allegations and grievance process.

If it is determined during the investigation and complaint resolution process in **Process B: Sexual Misconduct Complaint Resolution Process** that the alleged incident would constitute sexual harassment under Title IX, the complaint will be addressed under **Process A: Title IX Formal Complaint & Grievance Process**.

The Title IX Coordinator will provide the parties with written notice simultaneously in the event that the grievance process used to handle the complaint of sexual misconduct must be changed.

If you have questions about filing a complaint, we encourage you to contact the Title IX Coordinator. The Title IX Coordinator's contact information is as follows:

Steven Schweitzer
Academic Dean, Professor & Title IX Coordinator
615 National Road W.
Richmond, IN 47374
Phone: 765-983-1829
Email: titleix@bethanyseminary.edu

In this document, you will see various terms. The definitions of these terms are below:

Complainant: An individual who is alleged to be the victim of conduct that could constitute sexual harassment

Respondent: An individual who has been reported to be the perpetrator of conduct that could constitute sexual harassment

Witness: An individual with first-hand knowledge of the alleged incident. This may include someone you told about the alleged incident after it occurred.

Once you have completed this complaint, please submit via email, mail, or deliver to the office of the Title IX Coordinator.

Thank you for filing a complaint to initiate Process B: Sexual Misconduct Complaint Resolution Process. You can find additional resources about Bethany's policies and protocols regarding incidents of sex discrimination, sexual misconduct, and sexual harassment on our [website](#).

SEXUAL MISCONDUCT COMPLAINT

NOTE: The fields with an asterisk (*) indicate information that must be completed to file a complaint. If you are unable to complete the required fields or wish to remain anonymous, please complete an Incident Report rather than this complaint.

COMPLAINANT INFORMATION

*Your Full Name:

*Bethany ID #:

*Email Address:

*Phone Number:

Nature of
Complaint:

- Complaint against Bethany employee Complaint against Bethany Student
 Complaint against Bethany Community Member
 Complaint against Non-Bethany Community Member Unknown

*Date of Incident:

*Approximate Time
of Incident:

*Location of
Incident (be as
specific as possible):

Gender:

- Male Female Gender Non-Conforming

- Organization Other (specify if desired) _____

DOB (YYYY-MM-DD):

Address:

INVOLVED PARTIES

Please complete the following information to the best of your knowledge, including the name of the Respondent (if known) and the names of any witnesses. If you do not know the name of the Respondent, please type "Unknown Respondent" in the name field.

If you would like to list more than one witness, please fill out the fields on the last page of this document.

RESPONDENT INFORMATION

Name or
Organization:

Bethany ID #:

Email Address:

Phone Number:

Status at Bethany:

- Student Faculty Member Staff Member
 Non-Community Member Other/Unknown (please specify) _____

Gender:

- Male Female Gender Non-Conforming
 Organization Other (specify if desired) _____

DOB (YYYY-MM-DD):

Address:

WITNESS INFORMATION

Name or
Organization:

Bethany ID #:

Email Address:

Phone Number:

Status at Bethany:

- Student Faculty Member Staff Member
 Non-Community Member Other (please specify) _____

Gender:

- Male Female Gender Non-Conforming
 Organization Other (specify if desired) _____

DOB (YYYY-MM-DD):

Address:

*DESCRIPTION OF THE INCIDENT

*Please describe the incident in detail, using specific, concise, and objective language to explain the who, what, where, when, why and how of the incident. If you need more space to describe the incident, you may attach an additional document to this report. *(required)*

ADDITIONAL INFORMATION

Please provide any additional information that you would like the Title IX Coordinator to know such as your reason for reporting this incident, immediate security concerns, or questions about next steps.

RELEVANT DOCUMENTS OR PHOTOS

Please attach to this report any documents, emails, photos, screenshots of relevant texts or social media posts/messages, or any other materials that may be relevant to your report. If you do not have access to these materials at this time, you will have additional opportunities to present them during the investigation.

AUTHORIZATION & SIGNATURE

*I understand that by submitting this complaint, I am knowingly initiating the complaint resolution process (i.e. formal investigation) related to the allegations that have been described. *(required)*

Yes, I understand

* I understand that upon receipt of this complaint, the Title IX Coordinator may contact me to gather additional information, if necessary. *(required)*

Yes, I understand

* I understand that upon the Title IX Coordinator’s review, Bethany will use the procedures outlined in Process A: Title IX Formal Complaint & Grievance Process rather than Process B: Sexual Misconduct Complaint Resolution Process if the alleged conduct:

1. Would constitute sexual harassment as defined in the Sexual Misconduct & Sexual Harassment Policy if proven;
2. Occurred in Bethany’s education program or activity;
3. Occurred in the United States; and
4. Occurred after August 14, 2020.

*I understand that if I do not wish to proceed with Process B: Sexual Misconduct Complaint Resolution Process, or Process A: Title IX Formal Complaint & Grievance Process if the complaint must be addressed under this process, I have the right to notify the Title IX Coordinator in writing that I would like to withdraw the formal complaint or any allegations therein.

Yes, I understand

By signing my name below, I confirm that I am the Complainant making a Complaint of Sexual Misconduct. I also confirm that the information provided in this complaint is true to the best of my knowledge.

Signature: _____

Date: _____