

PITMAN SOCCER ASSOCIATION
Harassment Complaint Form

Player or Volunteer Name: _____

Team: _____

Volunteer Position (if applicable) _____

Name of Person Receiving Complaint: _____

Time Period Covered by Complaint: _____

Individuals Who Allegedly Committed Harassment:

<u>Name</u>	<u>Team</u>	<u>Volunteer Position</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe the dates and the nature of the harassment allegedly committed by each identified individual:

Identify all volunteers or others with knowledge of the complained of conduct:

Are there any documents containing information supporting the occurrences described above?

Is there any physical evidence which supports your complaint? If so, please describe:

Has the player/volunteer missed any practice or game time as a result of the alleged harassment? If “yes,” identify the occasions:

If you previously complained about this or related acts of general harassment to a PSA Board Member or Volunteer, please identify the individual to whom you complained, the date of the complaint, and the resolution of your complaint:

(Attach Additional Sheets if Necessary)

What is your requested remedy to this complaint?

Acknowledgement:

The information provided above is true and correct.

Signature of Complainant: _____ Date: _____

Printed Name of Complainant: _____

To investigate your complaint, it will be necessary to interview you, the alleged harasser(s), and any witnesses with knowledge of the allegations or defenses. PSA will notify all persons involved in the investigation that it is confidential and that unauthorized disclosures of information concerning the investigation could result in disciplinary action up to and including removal from PSA.

I am willing to cooperate fully in the investigation of my complaint and to provide whatever evidence PSA deems relevant.

Signature of Complainant: _____ Date: _____