

SEXUAL HARASSMENT COMPLAINT FORM

If you believe the Church's policy against sexual harassment has been violated, you are encouraged to complete this form and personally hand deliver or send via certified mail [return receipt requested] to the Pastor OR Executive Minister, Bridge Street Church, 277 Stuyvesant Avenue, Brooklyn, NY 11221. Once you submit this complaint form, the Church will follow the investigation process described in its policy.

If you are more comfortable reporting complaints verbally or in manner other than this form, please contact Rev. David B. Cousin, Sr., Pastor at (914) 703-9773 (cell) or via email at pastorcousin@aol.com so we may begin investigating your complaint.

GENERAL INFORMATION

Your Name / Job Title: _____

Your Department / Supervisor: _____

Preferred Communication Method (if via e-mail or phone, please provide contact info): _____

Email Address: _____

Phone #: _____

COMPLAINT

1. Please tell us who you believe has violated our policy against sexual harassment.

2. Please describe the conduct or incident(s) that is the basis of this complaint and your reasons for concluding that the conduct violated our sexual harassment policy. Please use additional sheets of paper if necessary and attach any relevant documents or evidence to this form.

3. Please provide specific date(s) the alleged misconduct occurred. Additionally, please advise if the alleged misconduct is continuing?

4. Please list the name and contact information of any witnesses or individuals that may have information related to your complaint.

5. Have you previously complained or provided information (verbal or written) about a violation of the Church's sexual harassment policy to the Church? If yes, when and to whom did you complain or provide information?

I have reviewed the Church's policy against sexual harassment and request that the Church investigate this complaint in a timely and confidential manner, and advise me of the results of the investigation.

Signature: _____ Date: _____