TOURO UNIVERSITY

Office of Institutional Compliance

202 West 43rd Street
Eleventh Floor
New York, New York 10036
Tel: 646.565.6565

Office of Institutional Compliance - Information Submission Form

The Touro University System ("Touro") pledges its efforts to ensure an environment in which the dignity and worth of all members of the community are respected. Touro's Office of Institutional Compliance will review and, if necessary, investigate any complaint related to concerns of discrimination and harassment based upon race, gender (which would include Sexual harassment and Sexual misconduct), and/or gender identity or expression, color, creed, religion, age, national origin, ethnicity, disability, veteran or military status, sex, sexual orientation, marital status, citizenship status, or any other legally protected basis.

To submit a complaint we that this form be completed to provide necessary information where known. Upon review of the information, the Office of Institutional Compliance will determine what response, if any, can be performed and the appropriate path forward. For more information regarding the investigation process, please visit: Institutional Compliance Complaint Procedures

For alleged sexual misconduct occuring after August 14th 2020 and covered under the Title IX Grievances Policy, the completion and execution of the **Title IX Grievance Policy Addendum ("Addendum")** will be required in order for this submission form to serve as a Formal Complaint, as defined by the Title IX regulations and Touro policy. This form will not be considered a Formal Complaint without being accompanied by a signed Addendum, as such no investigation under Title IX can commence. Please be advised that the abence of the Addendum does not prevent Touro from investigating the alleged actions under its Sexual Misconduct policy (see below for the policy that applies to your campus). For relevant definitions and procedures on Title IX, please see the following policy: Title IX Grievance Policy.

For alleged sexual misconduct occurring on or before August 14, 2020, or allegations not covered under the Title IX Grievance Policy, please see the following relevant policy and procedures:

- Touro New York, NYMC and NYCPM Sexual Misconduct Policy
- Touro University Nevada Sexual Misconduct Policy
- Touro University California Sexual Misconduct Policy
- Touro University Worldwide/Touro College of Los Angeles Sexual Misconduct Policy
- Touro University Illinois & Hebrew Theological College Sexual Misconduct Policy

For alleged discrimination based on race, color, or national origin, please see the following and procedures:

- Touro University Title VI Policy

This form may be submitted via email, online or in-person to the Office of Institutional Compliance. Upon receipt, a representative from the Office of Institutional Compliance will contact and schedule an in-take interview with the complainant. In addition, a complainant may complete this form in-person, if desired.

The information provided on this form will be kept confidential to the extent necessary and possible under applicable institutional and federal regulations. Further, Touro implements a strict retaliation policy that prohibits retaliation of any kind against those coming forward with a complaint of alleged sexual harassment or sexual misconduct. For additional and detailed information on Touro's policies on confidentiality and retaliation, please see the Title IX and Sexual Misconduct Policies above.

If this matter is an emergency or time-sensitive, please call 911 or the closest security guard immediately. This form is not intended for use in emergency situations.

Once completed, please submit to: Compliance@touro.edu

Name of the Person Filing the Complaint (Complainant): **Touro ID Number:** _____

_____

Affiliation with Touro /Division:

☐ Student ☐ Faculty ☐ Staff ☐ Contractor ☐ Other: _____

Division/School of Touro:

_____

Email:

_____

Phone:

_____

Address:

_____

Date and Time of Occurrence/Incident:

_____

Location of Occurrence/Incident:

_____

Country: ☐ USA ☐ Other

Description of Complaint:

(please summarize in the space provided and attach additional pages, if needed)

_____
_____
_____
_____
_____
_____
_____
_____
_____

Name of Person or Persons Who Committed the Offense Against You (if known):

_____

Names and Contact Information of any Witnesses:

_____
_____
_____
_____
_____

Once completed, please submit to: **Compliance@touro.edu**