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SEXUAL VIOLENCE COMPLAINT FORM (Including threats of sexual violence)

Use this form to report a complaint of threats of sexual violence or incident(s) of sexual violence that you believe violates the school's Prevention of Sexual Violence Policy. The option to make a disclosure as per policy, to a member of the school community is also available which allows you to receive the appropriate support & referrals to community services if you do not wish to make a report.

Complainant & Respondent Information						
Name of Complainant (you):						
Student ID#:						
Pronouns (They / She / He etc.,):						
Complainant Department / Program:						
Preferred method of communication:						
E-mail Address:						
Contact Telephone Number:						
Relationship to Respondent (if any)						
Name of Respondent(s): (the person(s) you are making a complaint against)						
Respondent Department / Program (if known):						
Respondent contact details (if known):						

PLEASE NOTE: As a complainant you have a choice NOT to participate in an investigation. Investigations are conducted by an appropriate, designated university/school official.

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Allegation(s)									
Date(s) of incident(s): (Be as specific as you can)									
Location(s): (Be as specific as you can)									
Names of witness(es): (If any – include any contact info you have)									
Single incident or several? (Be as specific as you can)									
Describe the allegation(s) in your own words (be as detailed as you can).									
				(Pleas	e add ad	ditional pages	if vou need	d them)	
If you have any supporting documents or evidence?		YES 🗆				NO 🗆			
Do any witness(es) or others have any evidence that may support your complaint?		YES		NO		I DON'T	KNOW		
Attach any supporting documents, such as emails, screenshots of text messages, handwritten notes, or photographs. Physical evidence, such as personal belongings, injury images etc., can also be submitted. If you are not able to attach documents and they are relevant to your complaint, please list the documents									
below. If someone else has relevant documents (e.g., area covered by CCTV cameras etc.,), please note that also.									

The sections on this form are not mandatory however, please be mindful that if you do not provide your contact information the ability of the university/school to respond to what happened appropriately will be severely limited.

STUDENTS: please submit this form to the appropriate E-mail address;

YU New Brunswick & Online: sexualviolencereportnb@yorkvilleu.ca

YU Ontario: sexualviolencereporton@yorkvilleu.ca

YU British Columbia: sexualviolencereportbc@yorkvilleu.ca

TFS Ontario: sexualviolencereporttfs@torontofilmschool.ca

TFS Online: sexualviolencereporttfso@torontofilmschool.ca

FACULTY & STAFF: Please Submit this form to the Chief People Officer: kbird@yorkvilleu.ca