

Hazing Complaint Form

Rocky Vista University is committed to ensuring a safe learning environment that supports the dignity of all members of RVU and its community. RVU does not allow hazing of any kind in its programs or activities in compliance with the Department of Congress' Stop Campus Hazing Act H.R.. 5646.

Hazing shall be reported immediately to the Office of Student Affairs, the Department of Campus Safety, or the Compliance Office through the University's established complaints processes and systems. This includes complaints filed through the EthicsPoint reporting system if you so choose at: http://rvu.ethicspoint.com. RVU will investigate all reports thoroughly and in a timely manner while ensuring the confidentiality of those involved to the fullest possible extent.

Anonymity: This complaint form may be submitted anonymously. The reporter is encouraged to provide any information related to the report in order to facilitate an investigation into the reported conduct. Legal and regulatory obligations may require the University to take some action once it is informed that hazing misconduct may be occurring. Not having the identity of the reporter may limit the ability to respond fully to the incident and may limit the ability to discipline the respondent.

Confidentiality: Legal and regulatory obligations may require the university to take some action once it is informed that misconduct may be occurring. Although the confidentiality of the information received and the privacy of the individuals involved cannot be guaranteed, confidentiality and privacy will be protected to as great an extent as is possible. The expressed wishes of the complainant regarding confidentiality will be considered in the context of the university's legal obligation to act upon the charge and the right of the charged party to be informed concerning the charge. Honoring the request may limit the ability to respond fully to the incident and may limit the ability to discipline the respondent.

Complainant's Name:	Phone:
Email:	_
□ I request this report and my identity to remain confidential. confidentiality of all participants will be maintained to the fulle. University must weigh this request against its obligation to proenvironment for all of its students and employees, and will evaluate with the University's Anit-Hazing Policy found at: policies.rvu.e	st extent possible, but the vide a safe, anti-hazing Iluate my request in accordance
*Please note that if you fail to provide identifying information a investigation and response may be impeded.	about yourself, the University's
Respondent's (Accused) Name:	
Phone and/or Email (if known):	
Date(s) of Alleged Violation(s):	



Description of Incident(s): (please use size 12 font – text box will expand)	
Witness(es) to Incident: (include name, phone, em	ail if possible)
Please include any other information and/or evidentinvestigation needs to take place.	ce that can be helpful if it is decided an
☐ I Request an Investigation Take Place by the Office	e of Compliance
☐ I Request an Informal Conciliation/Resolution Pro	-
☐ I Request Supportive Measures Only At This Time, Grievance Process Later	But I Do Not Waive My Right to a
PLEASE SIGN AND AN INTAKE AND CONSULTATION OF COMPLIANCE OFFICE	WILL TAKE PLACE WITH THE
Complainant Signature	 Date
To be Filed with:	
The Compliance Office at: compliance@rvu.edu or of there is a potential or actual conflict of interest with the compliance of the comp	_
 Complaints from Students, Dr. Ashley Farmer- afarmerhanson@rvu.edu 	-
Complaints from Employees, Ms. Kat Abernathy	y, VP of Human Resources:
kabernathy@rvu.edu	
Compliance Office Signature (After Intake)	