

# Title IX Formal Complaint

This complaint must be signed and filed with:

Sandra McCarthy, JD, Title IX Coordinator  
 Hudson Valley Community College  
 80 Vandenberg Avenue, CTR 293  
 Troy, NY 12180  
 (518) 629-4816

Or by email at [s.mccarthy@hvcc.edu](mailto:s.mccarthy@hvcc.edu)

Complainant Name:	Complainant Status: Employee ___ Student ___ Other ___
Complainant Contact Information: Local Address:  Other Address:	HVCC email: Phone: Cell: Please state preferred contact method:
Respondent Name:	Respondent Status: Employee ___ Student ___ Other ___
Respondent Contact Information: Local Address:  Other Address:	HVCC email: Phone: Cell: Other contact information:
Exact Location of Incident:	Time of Incident:

\*The signing and filing of this grievance will result in an investigation. You will be asked to provide a more detailed narrative of this event by the investigator. To commence the investigation, please provide a brief description of your grievance:

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Please note all respondents are presumed 'not responsible' during the course of an investigation. Supportive measures will be afforded to both parties through the office of the Title IX Coordinator during the course of this investigation.

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Complainant Name:

\_\_\_\_\_  
Date: