**GENDER SENSITIZATION COMMITTEE AGAINST SEXUAL HARASSMENT**

**ROOM NO. 114-114A, ADMINISTRATION BLOCK,**



**JAWAHARLAL NEHRU UNIVERSITY NEW DELHI- 110067, INDIA**

**FORM I**

**Proforma for Filing of Complaints of Sexual Harassment**

*The processing of this complaint by the GSCASH is subject to physical validation through signature in the GSCASH office (Room No.114-A, Administration Block) by the complainant(s) within 24 hours of online submission.*

*\*In order to ensure accessibility and confidentiality for the VH/PH complainant(s), the GSCASH will arrange for the signature to be collected from them at their place of residence/work inside the campus.*

1. **Complainant(s):**Student/resident/academic staff/ non-teaching staff/outsider/service provider

|  |  |
| --- | --- |
| Name |  |
| Age |  |
| Sex |  |
| Address |  |
| Centre/School |  |
| Phone number |  |
| Email |  |

1. **Person(s) against whom the complaint is being lodged:**Student/resident/academic staff/ non-teaching staff/outsider/service provider

|  |  |
| --- | --- |
| Name(s) |  |
| Age |  |
| Sex |  |
| Address |  |
| Centre/School |  |
| Phone number |  |
| Email |  |

1. **The Complaint:**

|  |  |
| --- | --- |
| 1. Is the defendant known to the complainant? |  |
| 1. Is this the first incident of this kind? If yes, skip 3and 4. |  |
| 1. Were exactly the same person(s) involved? If no, specify further. |  |
| 1. Was the first incident reported? To whom? When? What action, if any was taken? |  |
| 1. Approximate date(s), time(s) and location(s) of incident(s), starting from the most recent. |  |

**Additional details of the complaint may be recorded here:**