



NOTICE OF DISCRIMINATION/DISCRIMINATORY HARASSMENT

AMERICAN UNIVERSITY OF BEIRUT

OFFICE OF THE PRESIDENT

To promote timely and effective review, AUB encourages Reporting Parties to file this form as soon as possible, after the alleged harassing behavior or prohibited conduct. A delay in reporting may affect AUB's ability to gather relevant and reliable information, contact witnesses, investigate thoroughly, and respond meaningfully. It may also affect AUB's ability to take disciplinary action against a student, faculty member, staff, or other member of the AUB community who engaged in prohibited conduct.

For complete information, please consult AUB's [Procedures for Addressing Discrimination and Discriminatory Harassment, including Sexual Harassment](#).

When this form is completed and signed, it should be submitted in person, via e-mail, internal mail, or mail by the reporting party to the Equity/Title IX Coordinator in the Office of the President, located on the 4th floor of College Hall, or to a Title IX Deputy. Information describing the alleged harassment, as well as any informal efforts to resolve the problem, and copies of documentary evidence that may support the case may be provided with the form or during the intake process after the form has been submitted.

Reporting Party Information

Reporting Party's name: _____

E-mail address: _____

Telephone number: _____

(Please provide your home number or AUB extension or mobile number)

University status: () Faculty () Staff () Student () Other: _____

Job title (if applicable): _____

Faculty and/or department: _____

Head of department's name: _____

Responding Party Information

Responding Party's name: _____

University status: () Faculty () Staff () Student () Other: _____

Job title: _____

(If applicable)

Faculty and/or department: _____

Head of department's name: _____

Alleged incident(s)

Alleged incident type:

Discrimination

Discriminatory Harassment

Retaliation

Discrimination/ Discriminatory Harassment related to:

Alleged incident date:

Alleged incident place:

Description of alleged incidents:

Signature of Reporting Party

Date submitted