



## COMPLAINANT

### NOTICE OF RIGHTS AND RESPONSIBILITIES FOR SEXUAL MISCONDUCT

Please review the statements listed below.

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*Print Name of Complainant*

*UID#:*

#### **I HAVE BEEN ADVISED OF:**

1) The University's Sexual Misconduct complaint, investigative and resolution process, including, but not limited to:

- My right to a Support Person,
- My right to an Advisor,
- My right to report sexual misconduct to law enforcement at any time and, upon request, to have the University assist me in doing so,
- Options for voluntary resolution,
- My right to review and comment on the Draft Investigation Report,
- My right to submit a formal response to the Final Investigation Report, and
- My appeal rights.

2) Available services on campus and in the community for counseling, health, mental health, and legal assistance.

3) Available Interim Protective Measures (e.g., academic accommodations, alternative housing, alternative employment accommodations, "no contact" directives).

#### **I UNDERSTAND THAT:**

4) The University's Sexual Misconduct complaint, investigation and complaint resolution process is a University administrative process, independent of any criminal or other legal processes.

5) The University may need to investigate and take action concerning my report, even if I do not want to proceed with the investigation and complaint resolution process.

6) My complaint will be reviewed under the University' Sexual Misconduct Policy & Procedures.

7) I am allowed to have a Support Person present during any investigative or complaint resolution proceeding or related meeting.

8) I am allowed to have an Advisor (non-attorney or attorney, at my own expense) accompany me to any investigative or complaint resolution proceeding or related meeting.

a. I understand that **at all times** the University will communicate directly with me; not my Advisor.

b. I understand that my Advisor may not speak for me but may advise me privately.

c. I understand that if I want the University to share written communications with, or communicate with my Advisor, I must make such a request in writing and sign a FERPA waiver.

9) Retaliation against me, or anyone who participates in a sexual misconduct investigation is prohibited and that persons who retaliate may be disciplined.

a. I understand that I should immediately report any incidents of retaliation to the Office of Civil Rights & Sexual Misconduct (OCRSM) at [titleixcoordinator@umd.edu](mailto:titleixcoordinator@umd.edu)

10) Conduct may violate the University's *Sexual Misconduct Policy & Procedures* even if it does not violate the law.

11) Persons who commit sexual misconduct in violation of federal, state or local laws may also be subject to criminal charges.

\_\_\_\_ I received a copy of the University's *Sexual Misconduct Policy and*  
(initial) *Procedures* and had an opportunity to ask questions and have them answered.

\_\_\_\_ I understand my rights and responsibilities as a Complainant in the University's  
(initial) sexual misconduct complaint, investigative and resolution processes.

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SIGNATURE

DATE