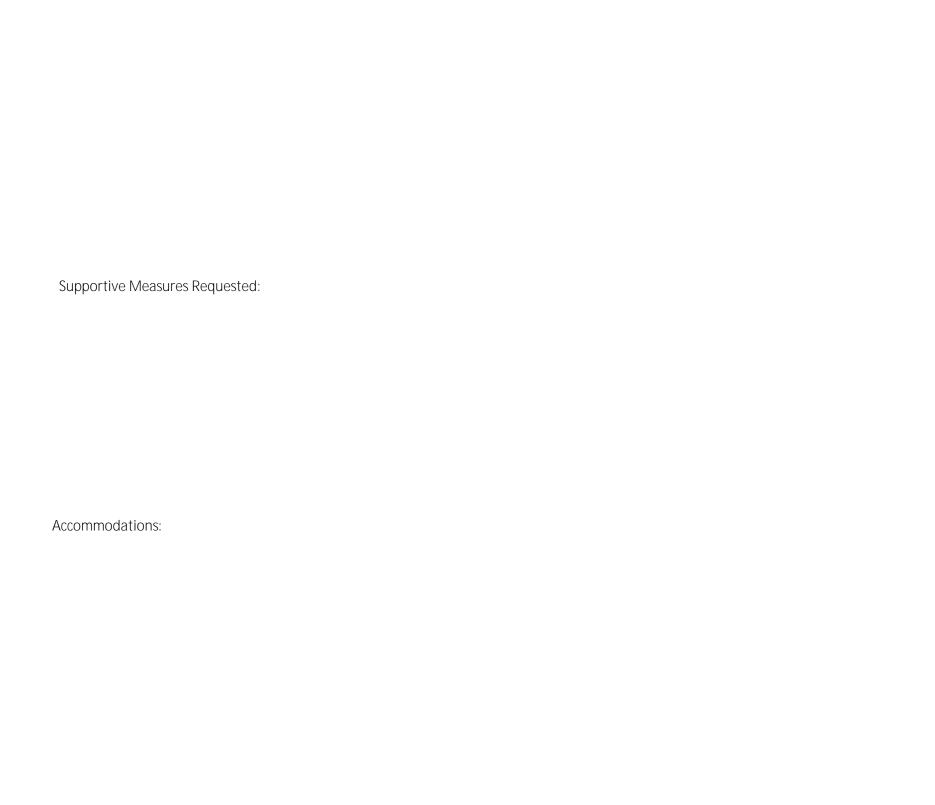
Glenville State University Formal Complaint Form

| Today's Date: | |
|------------------------------|--------------------------------|
| Name: | Glenville State University ID: |
| Phone Number: | E-mail: |
| Preferred Method of Contact: | |
| University Affiliation: | |

| University Affiliation: | |
|-------------------------|--------------------------------|
| Phone Number: | E-mail: |
| Social Media Accounts: | |
| | |
| Witness 1: | Glenville State College ID: |
| University Affiliation: | |
| Phone Number: | E-mail: |
| Witness 2: | Glenville State University ID: |
| University Affiliation: | |
| Phone Number: | E-mail: |
| Witness 3: | Glenville State University ID: |
| University Affiliation: | |
| Phone Number: | E-mail: |
| | |

Incident Narrative (this can be brief; a full statement will be taken by the investigator):



| Received By: | Date: |
|--------------|-------|
|--------------|-------|

Please mail, email or fax the completed form only to:
Tegan N. McEntire
Title IX Coordinator
Glenville State University
200 High Street
Glenville, WV 26351
Telephone: (304) 462-6193
Fax: (304) 462-6198

TitleIX@glenville.edu