Mississippi State University

Office of Civil Rights Compliance

Notice of Sexual Misconduct Complaint

**TO: EMAIL:**

**FROM:**

**DATE:**

This is to notify you that the university has received a formal complaint of sexual misconduct against you. Please review this notice carefully, as it contains important information about the procedures the university will follow and your rights in connection with the process.

**Description of Misconduct**

**Summary of Your Rights and Responsibilities**

* The university will investigate this complaint. The procedures for that investigation and any adjudication that may occur are found in the University’s Sexual Misconduct Policy (OP 3.04), which has been provided to all parties. If you have questions about policies or procedures, please consult the policy. If you still have questions, please contact the Title IX Coordinator.
* Persons accused of sexual misconduct are presumed not responsible—that is, presumed not to have committed the alleged misconduct—unless and until proven responsible under university procedures. The determination of responsibility or non-responsibility is made at the conclusion of the investigation and adjudication process.
* In this process, the person who asserts they are the victim of sexual misconduct is called the “complainant.” The person who is accused of sexual misconduct is called the “respondent.” All complainants and respondents in a matter are collectively referred to as the “parties.”
* You may be assisted at any stage in this process by an advisor of your choice. Your advisor may be, but does not have to be, an attorney. If you do not have an advisor, the university will appoint one for you at no cost. If you wish to have an advisor appointed, you should inform the Title IX Coordinator in writing of that request as promptly as possible. You are responsible for ensuring your advisor’s availability and participation in any interview, hearing, or other meeting.
* Both you and the complainant will have an equal opportunity to submit evidence in support of your position, and to review the evidence the University has collected. You will be provided with a written summary of the evidence prior to a hearing on this matter. If you wish to review evidence prior to that time, you should inform the Title IX Coordinator in writing of that request.
* Supportive measures are available both to complainants and respondents. Supportive measures may include counseling, extensions of deadlines or other course-related adjustments, modifications of work or class schedules, providing an escort or other security, mutual orders mandating no contact between individuals, changes in housing or work locations, leaves of absence, monitoring of certain areas, or other similar measures. Request for supportive measures should be communicated to the Title IX Coordinator.
* MSU expects all parties and other participants in this process to tell the truth. It is a violation of MSU policies to knowingly or recklessly make false statements or submit false information in connection with the investigation or adjudication process. Such conduct is subject to disciplinary action up to and including expulsion or termination of employment.
* It is a serious violation of MSU rules to retaliate in any manner against any complainant, respondent, witness, or other person for participating in any capacity in proceedings under this policy. Retaliation should be reported immediately to the Title IX Coordinator.
* MSU’s Title IX Coordinator is Brett Harvey, Director of Civil Rights Compliance. He can be reached at 662-325-5839 or at titleix@msstate.edu. His office is located in the Office of Civil Rights Compliance at 56 Morgan Street, Mississippi State, MS 39762.
* A copy of this notice has been provided to the complainant in this matter.

**Acknowledgement of Receipt**

I acknowledge that I have received a copy of this Notification on the date listed below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Date