

GOVERNMENT COLLEGE MOKERI
(P O Mokeri, Kozhikode dist. 673507,
icccmokeri@gmail.com, Phn. 0496-2587215)
INTERNAL COMPLAINTS COMMITTEE

Proforma for Filing of Complaints of Sexual Harassment

The processing of this complaint by the ICC is subject to physical validation through signature by the complainant(s) within 24 hours of submission of form.

I. Complainant(s):

Student/Faculty/ Non-teaching staff

Name	
Age	
Sex	
Address	
Department	
Phone number	
Email	

II. Person(s) against whom the complaint is being lodged:

Student/Faculty/ Non-teaching staff

Name(s)	
Age	
Sex	
Address	
Department	
Phone number	
Email	

III. The Complaint:

1. Please briefly describe the nature of your complaint. Include all details that you believe are relevant.	
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2. Is the offender known to the complainant?	
3. Is this the first incident of this kind? (If yes, skip 4 and 5)	
4. Were exactly the same person(s) involved? If no, specify further.	
5. Was the first incident reported? To whom? When? What action, if any was taken?	
6. Approximate date(s), time(s) and location(s) of incident(s), starting from the most recent.	
7. Are there any witnesses to the incidents described above? If so, please list their names.	

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

Complaint filed by

Signature:

Date:

Name:

Place: