

1.4 SEXUAL HARASSMENT

Any type of sexual harassment is against organization policy and may be unlawful.

We firmly prohibit sexual harassment of any employee by another employee, department manager or third party. Harassment of third parties by our employees is also prohibited. The purpose of this policy is not to regulate the morality of employees. It is to ensure that in the workplace, no employee is subject to sexual harassment. While it is not easy to define precisely what sexual harassment is, it may include but is not limited to: unwelcome sexual advances, requests for sexual favors, and/or verbal or physical conduct of a sexual nature including, but not limited to, sexually-related drawings, pictures, jokes, teasing, uninvited touching or other sexually-related comments. The conduct prohibited by this policy includes conduct in any form, including but not limited to e-mail, voice mail, chat rooms, Internet use, text messages, pictures, images, writings, words or gestures.

Sexual harassment of an employee or third party will not be tolerated. Violations of this policy may result in disciplinary action up to and including discharge. There will be no adverse action taken against employees who report violations of this policy in good faith or participate in the investigation of such violations.

Any employee who believes that he/she or another employee is or has been a victim of sexual harassment or has been retaliated against for complaining of sexual harassment should report the situation immediately to the Executive Director. Reports can be made in person or via voicemail or email. If an employee makes a report and the Executive Director either does not respond or does not respond in a manner the employee deems satisfactory or consistent with this policy, the employee is required to report the situation to the Board President.

The organization will investigate every reported incident immediately. Any employee, department manager or agent of the organization who has been found to have violated this policy may be subject to appropriate disciplinary action up to and including immediate discharge.

The organization will conduct all investigations in a discreet manner. The organization recognizes that every investigation requires a determination based on all the facts in the matter. We also recognize the serious impact a false accusation can have. We trust that all employees will continue to act responsibly.

The reporting employee and any employee participating in any investigation under this policy have the organization's assurance that no reprisals will be taken as a result of a sexual harassment complaint.

All incidents of alleged sexual harassment may be reported directly to the Executive Director, Ms. Danzey. The attached form is used for making any harassment or complaint reports. Please fill out the attached form completely, and email Ms. Danzey directly at ed@slidellhousingauthority.org. If you do not wish to email, or do not have access to the internet, you may place the written report in an envelope labeled to Attn: Ms. Danzey, and placing the envelope in our dropbox next to the front office door.



Housing Authority of the City of Slidell

1250 Dr. Martin Luther King Jr. Drive
P.O. Box 1392, Slidell, LA 70459
(985) 726-9000 (985) 259-4585 fax
www.slidellhousingauthority.org



Workplace Harassment Complaint Form (including Sexual Harassment)

This form is to be used to document any claim of illegal harassment, including sexual harassment, which occurs in the workplace. To ensure that all harassment complaints are managed appropriately, effectively, and in accordance with the organization's policy, harassment complaints, including sexual harassment complaints, will be recorded using this form. Only those individuals authorized to receive such complaints may do so. If needed, guidance can be obtained from the Director of Human Resources or Title IX Coordinator.

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|---|--------------|
| Complainant: | Dept: |
| Name(s) of individual engaged in the harassment: | |
| Please describe the specific incident of harassment alleged. Describe each incident separately, including dates, times and locations. If you cannot remember exact dates, times or locations, please provide approximations. Use additional pages if necessary. | |
| Are there others who may have witnessed this alleged harassment? If so, please provide their name(s). | |

Are there others who may have experienced similar alleged harassment by the individual named above? If so, please provide their name(s).

Did you tell anyone about your experience after the alleged incident(s)? If yes, please provide their name(s).

Are there others who have witnessed this behavior or others who experienced similar behavior by the individual named above? If so, please provide their name(s) and state whether they are a witness to this behavior or an individual who has experienced similar behavior:

Did you speak to the individual named in this report about the alleged harassment? If yes, what was his or her response?

Complainant Signature: _____ Date: _____

Print Name: _____

Job Title: _____

OFFICIAL ONLY:

Signature of person receiving complaint: _____ Date: _____

Print Name: _____

Job Title: _____