Sexual Harassment Prevention Training for Employees

Module Four Attestation Statements

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| I understand anyone can report sexual harassment, including the target of the harassment or a third party who observes behavior they find offensive. |  |

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| I understand if I believe I have been subjected to sexual harassment or retaliation in violation of the Statewide Sexual Harassment Prevention Policy, I am strongly encouraged to promptly submit a complaint regarding the incident(s) to my supervisor or manager, division director, Human Resources or other agency designee or the Office of the State Inspector General if any of the above officials are the alleged harasser or retaliator, or if I have fear of retaliation by one of the above officials. |  |

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| I understand if I verbally report sexual harassment or retaliation, the contacted person will document the facts of the incident in writing. |  |

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| I understand a trained investigator within my agency, or one assigned by the Office of Inspector General (OIG) will promptly investigate reports of sexual harassment and/or retaliation. |  |

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| I understand if I submit an anonymous complaint or report, my agency will make every effort to investigate, but the investigator may require information from me to do a thorough investigation, making it impossible for me to remain anonymous. |  |

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| I understand my agency and all parties involved in the investigation will make every effort to maintain confidentiality of the information I report, but some information may be shared with agency officials and potential witnesses during the investigation and that complaints and reports of sexual harassment or retaliation, investigative reports, final determinations, and other related documents eventually become subject to disclosure under the Open Records Act. |  |

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| I understand I may be asked for an interview, to secure evidence such as voicemails, text messages, emails, etc., and possibly asked for a second or third interview. I must be honest and open about the facts of what occurred any time I am interviewed. |  |

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| I understand my agency make take interim measures while the investigation is ongoing, such as changes to my employment arrangements, work schedules, supervision, or other directives, to protect all parties involved in the investigation |  |

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| I understand after the investigation begins, a report of findings is provided to my agency leadership within 45 calendar days, pending an extension granted by my agency head if there are extenuating circumstances, and a final determination based on the investigative report is made by my agency within 21 calendar days. |  |