

**PARK CITY SCHOOL DISTRICT  
SEXUAL HARASSMENT INTERVIEW FORM**

Name of Interviewee: \_\_\_\_\_

Date: \_\_\_\_\_

Location of interview: \_\_\_\_\_

Interviewer: \_\_\_\_\_

Others present: \_\_\_\_\_

\_\_\_\_\_

What happened? (please be specific) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

On what date(s) did the incident(s) occur: \_\_\_\_\_

What time of day did the incident(s) occur: \_\_\_\_\_

Description of where the incident(s) happened: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Who was present, involved, and/or any witnesses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe how it made you feel: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What impact has this incident had on you personally? (i.e. missed school/work days, visit to the doctor, work/studies affected, spoken to anyone about the incidents):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you think this situation should be resolved? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there any assistance we can provide you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other notes: