

# Request for Title IX Supportive Measures

Please find below a list of Supportive Measures that can be provided on your behalf. There are also some spaces that you can insert interim measures that are not on this list, but may be available to address a unique situation or circumstance. Please check the specific measures or assistance that you are requesting.

Please check all that apply.

- No-Contact Order
- Change in residence on campus
- Assistance with course assignments or enrollment, please specify:
- Counseling
- Medical care
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_
- Other: \_\_\_\_\_
- Supportive measures declined by student.

Requestor:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Title IX Coordinator/Deputy Coordinator/Investigator

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

CC: Case File