



LAKE ZURICH COMMUNITY UNIT
School District 95

TITLE IX SEXUAL HARASSMENT REPORTING FORM

*Any person may report sex discrimination, including sexual harassment, whether or not the person reporting is the person alleged to be the victim of the conduct that could constitute sex discrimination or sex harassment. The report may be made in writing or verbally, and a report may be anonymous. This form is available for submitting a written report but is not required. The report may be made at any time in person, by mail, by phone, or by electronic mail to the District's Title IX Coordinator **[(s)]** at or any employee:*

*Julia Becich, Executive Director of Human Resources
832 S. Rand Road
Lake Zurich, IL 60047
Julia.becich@lz95.org
847-540-4960*

*Andy Lambert, Athletic Director
300 Church Street
Lake Zurich, IL 60047
Andrew.lambert@lz95.org
847-540-4381*

Date: _____

Name: _____

Anonymous reports are accepted.

Student Parent/Guardian Employee Other (please specify): _____

If a student, specify school and grade: _____

If a parent/guardian or other, provide contact information: _____

Is the person making this report also the victim of the alleged conduct? Yes No

District 95 Administration Center – 832 South Rand Road - Lake Zurich IL 60047

Phone: (847) 438-2831 FAX: (847) 438-6702

Person(s) reported as victim(s) of the alleged conduct:

Name: _____ School: _____ Grade: _

Name: _____ School: _____ Grade: _

Person(s) being reported as the alleged harasser(s):

Name: _____ Student Staff Other _

Name: _____ Student Staff Other _

Person(s) who witnessed or have knowledge of the alleged conduct:

Name: _____ Student Staff Other _

Name: _____ Student Staff Other _

Name: _____ Student Staff Other _

Approximate date(s) and time(s) of the alleged conduct: _____

Location(s) of the alleged conduct: _____
