



SEXUAL HARASSMENT STUDENT INCIDENT REPORTING FORM

PLEASE NOTE:

- 1) Deliver the original of this Reporting form to the School Principal or the District Title IX Coordinator.
- 2) If you have any questions regarding the complaint process and/or complaint form, please contact your student's Principal, or the Title IX Coordinator Isuzu Niizuma at 206-631-3104.
- 3) All reports should be addressed appropriately and in a timely manner, however, please note that no disciplinary action will be taken against an alleged perpetrator based solely on anonymous reporting.
- 4) Policy and Procedure 3205 - SEXUAL HARASSMENT OF STUDENTS PROHIBITED can be found at: <https://www.highlineschools.org/departments/student-support/bullying-civil-rights-sexual-harrassment>

1. Definition

Sexual harassment means unwelcome conduct or communication of a sexual nature. Sexual harassment can occur adult to student, student to student or can be carried out by a group of students or adults and will be investigated by the District even if the alleged harasser is not a part of the school staff or student body. The district prohibits sexual harassment of students by other students, employees or third parties involved in school district activities.

The term "sexual harassment" may include: acts of sexual violence; unwelcome sexual or gender-directed conduct or communication that interferes with an individual's educational performance or creates an intimidating, hostile, or offensive environment; unwelcome sexual advances; unwelcome requests for sexual favors; sexual demands when submission is a stated or implied condition of obtaining an educational benefit; and sexual demands where submission or rejection is a factor in an academic, or other school-related decision affecting an individual.

2. Personal Information

Today's Date: _____ School: _____

Reporting Person: _____ Phone Number: _____

Email Address: _____ Interpreter needed? _____

Complainant/Targeted Student: _____ Grade: _____

3. Information about the Respondent

Name of the Respondent/Alleged Aggressor: _____

The Respondents is a: () Student () Staff () Volunteer () Other _____

4. Complaint

Dates(s) and location (s) the incident allegedly occurred:

Earliest _____ Latest _____

Continuing Action _____

Did the conduct occur within the District's education program or activity? Yes No If yes, please describe.

Have you been excluded from participation in, been denied the benefits of, or been subjected to discrimination on the basis of sex or gender under any education program or activity? Yes No If yes, please describe.

Did the incident have a negative impact on:

Attendance Grades Activity/Program/School Participation Other. Please explain.

State the specific nature of your complaint and other relevant facts and circumstances. Explain in narrative form and be as specific as possible when discussing the incidents. Include the date(s), the behaviors, comments, the name(s) of the person(s) involved, and the name(s) of those who may have witnessed the incident(s). Specifically, how were you or the complainant sexually harassed or sexually assaulted. Use additional pages if necessary. **You are encouraged, but not required to attach additional materials, which may assist in the investigation process.*

Name of school or district staff member you have contacted about this issue (if any):

What was the response?

5. Witnesses

Person(s) who have knowledge of the events described on your complaint (People who either witnessed the incident(s) or have knowledge of events.)

Name: _____ Relationship to the complainant _____

Phone Number: _____ E-mail: _____

Name: _____ Relationship to the complainant _____

Phone Number: _____ E-mail: _____

Name: _____ Relationship to the complainant _____

Phone Number: _____ E-mail: _____

What are your desired next steps, or how would you like the district to resolve this complaint?

6. Investigation and Response

If the district knows that sexual harassment has created a hostile environment, it will promptly investigate to determine what occurred and take appropriate steps to resolve the situation. If an investigation reveals that sexual harassment has created a hostile environment, the district will take prompt and effective steps reasonably calculated to end the sexual harassment, eliminate the hostile environment, prevent its recurrence and as appropriate, remedy its effects.

Allegations of criminal misconduct will be reported to law enforcement, and suspected child abuse will be reported to law enforcement or Child Protective Services.

7. Confidentiality

If a complainant requests that his or her name not be revealed to the respondent or asks that the district not investigate or seek action against the respondent, the request will be forwarded to the District Ombudsman for evaluation. The District Ombudsman should inform the complainant that honoring the request may limit its ability to respond fully to the incident, including pursuing disciplinary action against the respondent.

8. Retaliation

Title IX and state law prohibit retaliation against any individual who files a complaint or participates in a complaint investigation. When an informal or formal complaint of sexual harassment is made, the district will take steps to stop further harassment and prevent any retaliation against the person who made the complaint, was the subject of the harassment, or against those who provided information as a witness. The district will investigate all allegations of retaliation and take actions against those found to have retaliated.

9. Statement

I declare that the information and documentation I have provided with regard to this complaint is true and accurate to the best of my knowledge. I understand that knowingly providing false information or information that I do not believe to be true in this complaint form or during the investigation may subject me to disciplinary action.

Complainant Signature: _____ Date: _____

I would like to file this complaint as a **Formal Complaint**. Initials _____ Date _____

FOR BUILDING ADMINISTRATOR OR CENTRAL OFFICE USE ONLY (STOP HERE)

Form received by: _____ Date received: _____

Supportive Measures offered to the Complainant: Accepted Declined Date: _____

Action taken/Notes:

Supportive Measures offered to the Respondent: Accepted Declined Date: _____

Action taken/Notes:

Notified of Outcome of the Investigation:

Parent/guardian of the complainant: Verbally In writing Date: _____

Parent/guardian of the respondent: Verbally In writing Date: _____

Sent copy of the form/other documents to the Title IX Compliance Officer: Date: _____

Referred to: _____