Uniform Complaint Procedure
Discrimination/Harassment Complaint Reporting Form

Golden Plains Unified School District

In accordance with the District's Uniform Complaint Procedures (5 CCR 4620) each school district shall follow uniform complaint procedures when addressing complaints alleging unlawful discrimination, harassment, intimidation and bullying against any protected group. Protected groups are enumerated by Education Code §§ 200 and 220. Additionally, it is the policy of the State of California, pursuant to Section 200, that all individuals shall enjoy freedom from discrimination and/or harassment of any kind in the educational institutions of the state. This also includes sexual harassment, which is a form of sexual discrimination (EC § 231.5).

I. Contact Information:
Name: _____________________________________________
Address: ____________________________________________
City: ___________________ Zip: ________________________
Home Phone: ___________________ Work or Cell Phone: _________

II. Complainant
You are filing this complaint on behalf of:
□ yourself □ your child or a (student) □ another student □ a group

III. School Information
School Name: _______________________________________
Principal's Name: ___________________________________
Address: ___________________________________________ City: ________________

IV. Basis of Complaint:
Please check the following box(s), based on the type(s) of discrimination, harassment, intimidation and bullying you experienced, (Education Code §§ 200 and 220

□ Sexual orientation □ Ancestry
□ Gender □ Mental or physical disability
□ Ethnicity □ Age
□ Race □ Association with any of these categories
□ National origin □ Sexual Harassment
□ Religion □ Sex (Title IX)
□ Color

V. Details of Complaint
Please answer the following questions to the best of your ability. Attach additional sheets of paper if you need more space.

Please describe the type of incident(s) you experienced that led to this complaint, including the events or actions, in as much detail as possible:
___________________________________________
___________________________________________
___________________________________________

1 of 2
List the **individuals** involved in the incident(s) complaint of:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

List any **witnesses** to the incident(s):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Describe the **location** where the incident(s) occurred:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Please list all the **date(s) and times** when the incident(s) occurred or when the alleged acts first came to your attention:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

**What steps**, if any, have you taken to resolve this issue before filing a complaint?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of person filing complaint  Date

Received by:
Title:

**Please provide a duplicate copy to the complainant.**

California Department of Education
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