

SEXUAL HARASSMENT FORMAL COMPLAINT FORM

School District policy prohibits sexual harassment and complies with 34 CFR §106 with respect to Title IX. Federal regulations implementing Title IX require the School District to investigate all formal complaints of sexual harassment filed with the School District. The Title IX Coordinator will provide additional information as to the complaint process. At the conclusions of the investigation, the Complainant (the individual alleged to be the victim of sexual harassment) will be provided a copy of the investigative report and notice of the outcome of the complaint.

If you believe that you, your child, or someone in the District has been a victim of sexual harassment, you may discuss the options available with the School District's Title IX Coordinator. If you choose to file a formal complaint, you are encouraged to complete this form and submit it to the School District's Title IX Coordinator. You also may file a formal complaint through other means, including but not limited to by telephone, email, or by regular mail.

School District policy expressly prohibits retaliation for filing a complaint and/or participating in an investigation.

If you are more comfortable having the Title IX Coordinator complete this form, the Title IX Coordinator may complete the form for you.

Pursuant to federal regulation, the Title IX Coordinator also may complete and sign this form to move a report of sexual harassment forward as a formal complaint even if the complainant does not wish for the matter to proceed as a formal complaint.

PLEASE NOTE: For purposes of the grievance process, including the submission of a formal complaint, a complainant may have an advisor, who may be, but is not required, to be an attorney. The advisor may accompany a complainant to any meeting or proceeding and may inspect and review evidence collected in the investigation process. Please notify the Title IX Coordinator of the name and contact information of any advisor.

Your Name _____

Telephone Number: _____

Campus: _____

COMPLAINANT (alleged victim of sexual harassment) INFORMATION

Name: _____

Telephone Number: _____

Campus: _____

Preferred Communication Method:

___ Email: _____

___ Phone: _____

___ In-person (please provide telephone number above)

___ Through Advisor (please provide name and telephone number)

Advisor: _____

Telephone Number _____

Email Address: _____

RESPONDENT(S) (individual(s) alleged to be perpetrator of sexual harassment) INFORMATION

Please identify the person(s) you alleged perpetrated sexual harassment:

Name: _____

Relationship to you, e.g., student, employee, or other: _____

Known contact information for this person: _____

PLEASE DESCRIBE WHAT HAPPENED. Please provide information as to the parties involved, date, location, and any impact the conduct has had on you/the complainant. You may use additional sheets of paper. Please also attach any documents or other evidence or describe the location of any evidence you cannot attach.

The parties involved in the allegations are (if knowns):

The conduct allegedly constituting sexual harassment is:

_____.

And the alleged date and location of the incident is (if known):

The impact the alleged conduct has had on the alleged victim is (if known): _____

PLEASE LIST THE NAME AND CONTACT INFORMATION OF ANY WITNESSES OTHER PERSONS WHO MAY HAVE INFORMATION RELATED TO YOUR COMPLAINT.

I understand that District policy prohibits knowingly making false statement or submitting false information during the grievance process.

I have reviewed the foregoing completed Sexual Harassment Form and the allegations and information provided herein are at this time, to the best of my knowledge true and correct.

Signature: _____ Date: _____

TITLE IX COORDINATOR:

Signature: _____ Date: _____