



Walled Lake Consolidated Schools Educational Services Center

850 Ladd Road, Building D
Walled Lake, MI 48390
Phone: 248/956-2022
Fax: 248/956-2120

Title IX Sexual Harassment Formal Complaint Form

This form is being submitted by: Complainant Title IX Coordinator

Complainant Name: _____

Address: _____

Phone: _____ Email: _____

If the Complainant is a Student:

Date of Birth: _____ School Attending: _____ Grade: _____

If the Complainant is an Employee:

Job Title: _____ Building: _____

Complaint Details

Reporter's Name (if different than Complainant): _____

Reporter's Relationship to Complainant: _____

Reporter's Address: _____

Reporter's Phone: _____ Reporter's Email: _____

1. Describe the alleged violation of Walled Lake Consolidated School District's Title IX Sexual Harassment Policy that you are requesting the District to investigate. Please be specific. Describe the incident(s) and identify the individual(s) and potential witnesses involved. Describe or attach any evidence you believe is relevant. Attach additional pages if necessary.



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2. Describe the date, time, and location(s) of the alleged incident(s).

3. Describe your proposed resolution to address the alleged violation(s).

Complainant/Coordinator Signature

Date

Please submit this form to:

Walled Lake Consolidated School District
Assistant Superintendent of Human Resources
Title IX Coordinator
850 Ladd Road, Building D
Walled Lake, MI 48390
Phone: (248) 956-2022

A person alleging discrimination on the basis of sex may file a complaint through Walled Lake Consolidated School District's grievance procedure. A complaint may also be filed at any time with the Office of Civil Rights (OCR), U.S. Department of Education, 1350 Euclid Avenue, Suite 325, Cleveland, OH 44115. Filing a complaint with Walled Lake Consolidated School District is not a prerequisite to filing with OCR. For additional information about Walled Lake Consolidated School District's grievance procedure, please contact the Title IX Coordinator identified above.