

Community Relations

Form For Filing Complaints

Cass County School District 13-0001  
Plattsmouth Community Schools  
1912 Old Hwy. 34  
Plattsmouth, Nebraska 68048

Date:

Person Making Complaint:

Address:

Phone:

(1) Name of child or person who you believe to have been unlawfully harassed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(2) Statement of facts detailing date and manner in which child or person was harassed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

(3) Names of witnesses to the harassment:

\_\_\_\_\_  
\_\_\_\_\_.

(4) Relief requested (what I want done in response to this request):

\_\_\_\_\_  
\_\_\_\_\_.

The undersigned states: I have a reasonable belief that the facts in this complaint are true and accurate, I am familiar with the School District’s Title IX and anti-discrimination grievance and complaint procedures, and I give permission for an investigation to be made into this complaint.

Received by: \_\_\_\_\_ Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Date of Adoption: September 10, 2018  
Reviewed: Feb. 11, 2019, Feb. 10, 2020, Feb. 8, 2021, Feb. 14, 2022, Feb. 13, 2023,

Reviewed: Feb. 12, 2024