

Please print or type when completing this form:

FORMAL COMPLAINT FORM (TITLE IX SEXUAL HARASSMNET)

Instructions for filling out this form: If you believe that you have been the victim of sexual harasment, please fill out this form, sign where indicated below, and submit it by hand delivery, electronic mail, of U.S. mail using the contact inforamtion listed for thr Title IX Coordinator for students at FFH(EXHIBIT) or the contact information listed for the Title IX Coordinator for employees at DIA(EXHIBIT).

This formal complaint form is intended for use by the allegued victim of Title IX sexual harassmnent (referred to in Title IX Regulations as the "complainant"). Undet Title IX and the Family Educational Rights and Privacy Act (FERPA), a parent or legal guardian may sign a complaint form and otherwise act on behalf of a minor in the formal complaint process.

If you are not filling this form out as a parent or guardian and you intend to report sexual harassment against another person in the District's educationa program or activities, please report your concerns to the District's Title IX Corrdinator so that the District can take further action. **Under federal law, only an alleged victim of sexual harrasment who is currently participating or attempting to participate in the District's education program oractivity (such as an enrolled student, an employee, or an applicant for employment or admission) had the right to u se the formal complaint process to initiate an investigation.** The District will process all formal complains in accordance with FFH(LEGAL) and (LOCAL) and, as applicable, DIA(LEGAL) and (LOCAL).

, , ,
ame of complainant:
ddress:
lephone number:
nail address:
the complainant articipating in or attempting
you are a parent or guardian filling this form out on behalf of a minor complainant, please provide your intact information below.
ame:
ddress:
lephone number:
nail address:



FABENS INDEPENDENT SCHOOL DISTRICT

You have the right to be represented by an advisor during the complaint process. The advisor may be, but does not have to be, an attorney. If you will be represented by an attorney or other advisor in presenting your complaint, please identify the person and provide the contact information below. If unknown at this time, you may provide this information at a later time.

Name:		
Address:		
Telephone number:		
Email address:		
·	ividuals that you intend to bring with you to any meetings or interviews associate ide their contact information below. You may add additional pages or provide this	
Name:		
Address:		
Telephone number:		
Email address:		
specific, factual details. Atta	d circunstances of the alleged sexual harassment causing this complaint. (Give ch additional sheets if necessary and indicate below how many additional pages amplete receipt of your complaint.)	
called the "respondent." Ple	process, the person who is allegued to have committed the sexual harrasment is ase provide the name(s) of the person or people you allege to be the or the alleged sexual harassmnet. If applicalve, please include the person's title or	
When add where did the se	rual harasmment occur? Please provide specific dates, times, and locations, if	



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Please explain how the alleged sexual harassment has impacted you. This could include physical injuries as well as impacts on your ability to access or benefit from the District's education program or activities.
Please provide the names and contact information of anyone who may have witnessed the alleged conduct.
If you have reported these allegations to another person, please state to whom you reported the alleged sexual harassment and provide their contact information (if known).
Title IX does not require complainants to attempt to resolve complaints of sexual harassment informally before filling a formal complaint. Nonetheless, if you have reported these allegations to a District employee, please state when, to whom, and what response you received.
Please list below any evidence that you believe is relevant to your allegations. This could include audio or visual media, physical objects, online materials, text messages, voicemal messages, screen captures, emails, or any other item you are attaching or intend to make avaiable for the purpose of this complaint. If known, please also identify any information in the District's possession that you believe to be relevant to you allegations and would like the District to review (such as emails or security camera footage).



Please provide any other information that would be helpful for the District in reviewing your allegations
Please describe the outcome or remedy you seek for this complaint.
Please provide below your physical or digital signature.
Complaint name:
Signature of complainant:
f complainant is under 18,
ignature of parent:
Date of filing:
f this formal complaint is being signed by the District's Title IX Coordinator instead of a complaint:
itle IX Coordinator Name:
itle IX Coordiantor Signature:
Date of filing: Notice to Complainant: This document is a legal record of the allegations of sexual harassment that yo

Notice to Complainant: This document is a legal record of the allegations of sexual harassment that you have reported to the District In order to request a formal investigation. Please keep a copy of this completed form and any supporting documentation for your records. Please also review your rights and responsabilities at FFH(LEGAL), which is attached to this form and also available online at: https://pol.tasb.org/Policy/Code/438?filter=FFH. Any questions or concerns that you have during this process may be directed to the District's Title IX Coordinator.

If, after reviewing your complaint form, the Title IX Coordinator finds that the allegations are not appropriate for a Title IX sexual harassment formal complaint process but should be investigated by the District under a



different policy or procedure, your formal complaint form will be forwarded to the appropriate District personnel in accordance with District policies. (see DIA,FFI,FFH) You have the right to appeal the dismissal of your formal complaint, as explained in Policy FFH(LEGAL) and the District's Title IX formal complaint process.

Fabens Independent School District Sexual Harassment Report Intake Form (Policy FFI & FFH)

Campus:	Today's Date:
Administrator Completing Report:	Title:
Person Reporting Alleged Sexually Harassing Condu	uct (if not Complainant):
Alleged Complainant's Name:	Grade: ID#:
Alleged Respondent's Name(s):	Grade:
	Grade: ID#:
	Grade:ID#:
Name(s) of Witness(es) to Alleged Conduct:	
Date(s) of incident(s):	
Location of incident(s):	
Description of incident(s) or Event(s):	



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1 of 1

Was incident ever reported to, or witnessed by, any other District employees?	☐ Yes	□No
If yes, to whom, when, and what was done:		
Other Information, including prior incidents or threats:		
Receiving School Administrator's Signature:		Date:
Additonal comments or notes from receiving administrator:		