Uniform Complaint Procedure Discrimination/Harassment Complaint Reporting Form

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 against any protected group. Protected groups put forth under Title IX and in California are enumerated by Education Code §§200 and 220, Government Code §11135, and include actual or perceived sex, sexual orientation, gender, ethnicity, race, ancestry, national origin, religion, color, mental or physical disability, and age, as well as association with a member of a protected class. Additionally, it is the policy of the State of California, pursuant to §200, that all persons should 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:		
City: Home Phone:	State: Work or Cell Phone:	Zip:
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:		Zip:
IV. Basis of Discrimination or Harassment	::	
Please check the following box(s), based on (Education Code §§ 200 and 220, Government C	,	-
 □ Sexual orientation □ Gender* □ Ethnicity □ Race □ National origin □ Religion □ Color □ AB9/Seth's Law 	 □ Ancestry □ Mental or physical □ Age □ Association with an categories □ Sexual Harassmer □ Sex (Title IX) 	ny of these

*According to state law, "'Gender' means sex, and includes a person's gender identity and gender related appearance and behavior whether or not stereotypically associated with the person's assigned sex at birth." CA Education Code §201.7 and CA Penal Code §422.56(c).

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.

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A brief but specific summary of the complaint and the	facts surrounding:
The name(s) of all district employees against whom a	complaint is being filed:
List any witnesses to the incident:	
A specific description of any prior attempt to discuss the his/her immediate supervisor and the failure to resolve	
Please list all the date(s) and times when the harass when the alleged harassment/discrimination first came	
The harm suffered?	
The proposed remedy, if any, that is being requested:	
Signature	Date
Received by:	Date Filed:
Title:	-

Please provide a duplicate copy to the complainant.

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