

**Title IX Formal Complaint and Request for Investigation**

Date: \_\_\_\_\_ School: \_\_\_\_\_

Name of Complainant: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Date(s) of alleged sexual harassment: \_\_\_\_\_

Name of alleged harasser (if known): \_\_\_\_\_

If name not known, description of harasser: \_\_\_\_\_

Where the harassment occurred: \_\_\_\_\_

Provide details of the harassment – continue on additional sheets if needed: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Witnesses to the harassment: \_\_\_\_\_

I have received a copy of the District’s formal complaint procedures and agree that they have been explained to me. I am requesting a formal investigation into sexual harassment be conducted.

Please print your name: \_\_\_\_\_

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature\*

Date: \_\_\_\_\_

\*If parent/guardian is not Complainant, a signature is necessary due to the Family Educational Rights and Privacy Act in order to provide consent to discuss the student with other parties and to comply with the Title IX regulations requiring the sharing of evidence with the other parties.