BILLINGS PUBLIC SCHOOLS

FORM 3230-F1

Title IX Complaint

This form may be completed by any student, parent or staff member of Billings Public Schools who has experienced or otherwise become aware of an incident that may constitute sexual harassment in violation of Title IX and/or Board Policy 3210.

Please complete this form to the best of your ability.

Today's Date:

Name:	E-mail:
Phone Number:	Preferred Method of Contact:
School:	Affiliation:
Incident Date(s):	Incident Time:

Incident Location	Type of Incident
☐On Campus	☐Bullying
☐Off Campus	☐Discrimination
☐School Sponsored Event	☐Harassment
☐Online / Electronic Communication	☐Retaliation
	☐Violence

Please list specific location:

Party Involved:	Affiliation:	School:
Phone number involved:	Email involved:	

Social Media Accounts Involved		
☐Instagram	☐Facebook	☐Snapchat
☐TikTok	☐Twitter	☐YouTube

Statement of Incident:

Statement of Incident continued:

Supportive Measures Requested:		
☐Academic Adjustment	☐Faculty Notification	☐Safety Plan
☐Counseling	☐No Contact Order	☐Schedule Adjustment

Accommodations:
☐I request accommodation(s) for a qualified disability
☐I do NOT request accommodations(s) for a qualified disability

Resolution Requested:		
☐No Action	☐Informal Resolution (if available)	☐Formal Resolution (Investigation and Determination)

Complainant Signature:	Date:

FOR OFFICE USE ONLY	
Received by:	Date:

NOTICE: In the absence of a formal complaint signed by a student or parent alleging a violation of Title IX, the Title IX Coordinator may sign a formal complaint. In the event that the Title IX Coordinator signs the formal complaint, the District's Grievance Procedure will apply.

Title IX Coordinator Signature:	Date: