



## TITLE IX FORMAL COMPLAINT FORM

The District's Title IX grievance formal complaint form gathers the essential basic facts of the alleged actions of sexual harassment or sexual violence, in violation of Title IX of the Education Amendments of 1972 ("Title IX") to facilitate administration of the District's Title IX Grievance Procedure, attached. Complaints alleging sexual harassment prohibited by Title IX will be promptly investigated in an impartial and in as confidential a manner as reasonably possible, so that corrective action can be taken if necessary.

### **Cooperatives Title IX Coordinator:**

**Dr. Gineen O'Neil**  
**6020 W. 151<sup>st</sup> Street**  
**Oak Forest, IL 60452**  
[goneil@swccase.org](mailto:goneil@swccase.org)  
**(708) 342-5320**

Please provide the following information in as complete a manner as possible.

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*Name of Complainant:*

*Contact information:*

*Student Grade:*

Please describe the action(s) you believe constitutes sexual harassment in violation of Title IX:

Date(s) of each incident:

Location(s) of each incident:

Name of individual(s) who engaged in the conduct alleged above:

Please provide any additional information that would be important to this complaint:

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Name

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Signature

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Date