

## **Title IX Sexual Harassment Formal Complaint Form**

Pursuant to Policy GAEB, JCAC and GAAA

I am filing this complaint as a (	circle one) <b>Employee</b>	, Parent/Guardian, Student, Title IX Coordinato
Print Submitting Person's Full Nar	me:	
Mailing Address:		
Home Phone:	Mobile Phone:	Email Address:
I. If this Complaint is fil the following:	ed on behalf of a Cha	ttooga County Schools (CCS) student, provide
Student's Full Name:		Student's Grade:
Student's School of Enrollment: _		
Parent/Guardian's Name:		Parent/Guardian's Phone Number:
II. If this Complaint is fil the following:	ed on behalf of a Cha	ttooga County Schools (CCS) Employee, provide
Employee's Full Name:		Title:
Employee's Department or Assign	ned School:	

## III. Carefully read and complete each section.

- Please state the basis of your complaint for sexual harassment as defined below. In the lined space below, provide the full name of the person(s) who are alleged to have committed the sexual harassment and describe the factual details of your complaint. Be sure to describe the date, time, and location of the harassment, and the identity of all parties involved in the harassment. Attach supporting documentation and additional pages, if necessary.
  - "Quid pro quo" harassment (an employee of CCS conditioning the provision of an aid, benefit, or service of the Board on an individual's participation in unwelcome sexual conduct. Explain in detail.)
  - Sexual harassment (unwelcome sex-based conduct that is so severe, persuasive, and objectively offensive that it effectively denies a person equal access to CCS's education programs or activities. Explain in detail.)
  - Sexual Assault is an offense defined as rape, fondling, incest or statutory rape; or

		s s s s s s s s s s s s s s s s s s s	Dating Violence is sex-based violence committed by a person- (A) who is or has been inated as cocial relationship of a romantic or intimate nature with the victim; and (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) The length of the relationship. (ii) The type of relationship. (iii) The requency of interaction between the persons involved in the relationship; Or comestic Violence is sex-based violence which includes felony or misdemeanor crimes of with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant person's acts under the domestic or family violence laws of the jurisdiction; or sex-based talking is engaging in a course of conduct directed at a specific person that would cause a reasonable person to- (A) fear for his or her safety or the safety of others or (B) suffer substantial emotional distress.
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	2.		person identified in question #1, please state the full name of such a person, the schoo ment (for students) or the department or position of employment (for employees) if
	3.	complair whether	entify any other person(s) who either witnessed the incident that is the basis of your of who you believe may have additional information regarding this matter. State the identified person is a student or employee, and provide a telephone number or dress, if known.

4.	Have you informed any other Chattooga County Schools employee of this complaint? If so, identify all persons with whom you have discussed this matter and approximate dates of your prior discussion(s).
5.	Please provide a statement of the relief sought by the Complainant (what would you like to happen as a result of your complaint?):
district	the aforementioned is true and correct to the best of my knowledge. I understand that the may need to disclose the identity of parties listed in my complaint to complete a required gation of the allegation(s) of sexual harassment.
By sign	ing below, I am requesting CCS to investigate the allegations of sexual harassment described
Submit	ting Person/Complainant's & Parent Guardian Signature
Date:_	
Education and the this for assistant	orm should only be used for complaints alleging sexual harassment as defined by Title IX of the ion Amendment of 1972 (20 U.S.C. 1681). When this form has been completed and signed by you, are received and noted by the Chattooga County School District, you will be provided with a copy of the as information about the Title IX complaint process. If you require emergency nace, please contact the appropriate school administrator. CCS's Title IX grievance policy is found in ICAC and GAEB.
*To be	completed by Title IX Coordinator
Compla	aint taken by:
Print F	ull Name: Date:

The Chattooga County School District does not discriminate on the basis of race, color, religion, sex, national origin, age, or disability in its programs, activities, or employment practices.