



**TITLE IX SEXUAL HARASSMENT FORMAL COMPLAINT**

*A Title IX Sexual Harassment Formal Complaint is a document filed by a Complainant or signed by the Title IX Coordinator alleging sexual harassment against a Respondent and requesting the District investigate the allegation(s) of sexual harassment. The Complainant is an individual who is alleged to be the victim of conduct that could constitute sexual harassment under Title IX. At the time of the Formal Complaint, the Complainant must be participating in or attempting to participate in the education program or activity of the District. This form is available for submitting a Formal Complaint, but is not required. The Formal Complaint must contain the Complainant's physical or digital signature, or otherwise indicate that the Complainant is the person filing the Formal Complaint. A parent/guardian may file a Formal Complaint on behalf of a minor. The Formal Complaint may be filed with the Title IX Coordinator in person or by mail or electronic mail at:*

*Julia Becich, Executive Director of Human Resources  
832 S. Rand Road  
Lake Zurich, IL 60047  
[Julia.becich@lz95.org](mailto:Julia.becich@lz95.org)  
847-540-4960*

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

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

Student  Parent/Guardian  Employee  Other (please specify): \_\_\_\_\_

If a student, specify school and grade: \_\_\_\_\_

If a parent/guardian or other, provide contact information: \_\_\_\_\_

**Person(s) reported as victim(s) of the alleged conduct:**

Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: .

Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: .

**Person(s) being reported as the alleged harasser(s):**

Name: \_\_\_\_\_  Student  Staff  Other \_

Name: \_\_\_\_\_  Student  Staff  Other \_

**Person(s) who witnessed or have knowledge of the alleged conduct:**

Name: \_\_\_\_\_  Student  Staff  Other \_

Name: \_\_\_\_\_  Student  Staff  Other \_

**Approximate date(s) and time(s) of the alleged conduct:** \_\_\_\_\_

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**Location(s) of the alleged conduct:** \_\_\_\_\_

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