
Please provide the following information about yourself: _____/_____/_____

Name: (first) _____ (last) _____

Street Address: _____ City: _____ State: _____ ZIP: _____

Phone: (____) _____ - _____ Work Home | Mobile | Email: _____@_____.

¹ Please note that if the conduct you are reporting does no rise to the level of sexual harassment under Title IX, the District will take the District steps to appropriately investigate and address your report in accordance with any applicable alternative District policies and procedures.

define sexual harassment under Title IX as conduct on the basis of sex that satisfies one or more of the following:

1. An employee of the school district conditioning the provision of an aide, benefit, or service of the school district on an individual's participation in unwelcome sexual conduct (pro quo):

II. COMPLAINANT

Who are you filing this Complaint on Behalf of?

Yourself | Your Child | Another Student | Other (explain): _____

Name of Complainant/Victim (if not yourself): (first) _____ (last) _____

Attending School or District Work Site: _____

If a Minor, Name of Parent/Guardian: (first) _____ (last) _____

Please list all individuals involved in the incident(s) and their relationship to the Complainant: _____

What steps if any, have you taken to resolve this issue before filing a complaint?

If you are the Complainant/Victim of the alleged conduct, are you open to/interested in resolving this complaint through the informal resolution process? Please check one: YES or NO

By signing this document, I hereby declare and certify that the stated information is true to the best of my knowledge. I am also requesting that the District accept this document as a formal Complaint and that the District move forward and investigate the allegations, detailed above.

Name (print): _____