SCHOOL DISTRICT OF WEST DE PERE TITLE IX DISCTIMINATION COMPLAINT FORM

Title IX Discrimination Complaint Form

Title IX of the Education Amendments of 1972 (20 U.S.C § 1681) is an all-encompasing federal law that prohibits discrimination based on the gender of students and employees of educational institutions which receive federal financial assistance. When the form has been completed and signed by you, and then signed by the Title IX Coordinator, your complaint has been properly received and noted by the district. We will provide you with a copy of this form as well as complete information about the Title IX complaint process.

The Title IX Coordinator and/or designee investigate complaints by parent, staff and students who believe themselves to be harmed by sexual harassment or discrimination and harassment related to gender. I am filing this complaint as a: check one (✓) ☐ Parent ☐ Staff □ Student Name:______ Phone:_____ Address: Complainant: Individual who is alleged to be the victim of conduct that could constitute sexual harassment (if different from person completing form). Name: Phone: Address: If student, grade: _____ School: Respondent: person or persons you believe committed the offense against you and how you have contact with them, e.g., supervisor, co-worker, peer, teacher. Name: Complaint: Describe your complaint related to the complainant's participation or attempt to participate in the school's educational program or activity. Please summarize below and attach additional pages describing your complaint if necessary. Date(s): _____ Time: ____

SCHOOL DISTRICT OF WEST DE PERE 5117 (E) cont'd TITLE IX DISCTIMINATION COMPLAINT FORM

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