

TITLE IX COMPLAINT FORM

PURPOSE: The purpose of the Title IX grievance procedures is to provide for the prompt and equitable resolution of complaints based on all forms of sex discrimination including sex based harassment, sex stereotypes, sex characteristics, pregnancy or related conditions, sexual orientation and gender. Sex based harassment includes in its definition *quid pro quo* harassment, hostile environment harassment, and specific offenses such as sexual assault, dating violence, domestic violence, and stalking.

INSTRUCTIONS: Individuals alleging Title IX discrimination and requesting review may complete this form and submit it to the School Leader or Title IX Coordinator as soon as possible after the occurrence of the alleged discrimination. An individual may also make an oral complaint to the Title IX Coordinator.

1. Name of Complainant: _____

Home Address	City/State/Zip	Home Phone
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School: _____ **Grade:** _____

2. Name of Respondent: _____

School: _____ **Grade:** _____

3. Nature of Grievance: Please provide a detailed description of the conduct you believe may be sex discrimination, including complaints of sex based harassment in violation of Title IX and identify with reasonable particularity any person(s) you believe may be responsible. Please attach additional sheets, if necessary:

4. When did the actions described above occur? Include date, time and location.

5. Are there any witnesses to this matter? (Please circle) **Yes** **No**
If yes, please identify the witnesses:

6. Did you discuss this matter with any of the witnesses identified in Item 5? (Please circle) Yes No

If yes, please identify:

Person to whom you have spoken: _____ Date: _____

Method of communication:

7. Have you spoken to any administrator(s) or other Academy staff member(s) about this matter? (Please circle)
Yes No

If yes, please identify:

Person to whom you have spoken: _____ Date: _____

Method of communication:

8. Please describe the result of the discussion(s) identified in Item 7:

9. Please describe what resolution are you seeking:

I certify that the foregoing information is true and correct.

Print Name

Signature

Date