

THE RISK OBSERVER

FOUNDED 2006 — VOL. CLXI

PROFESSIONAL UNDERWRITERS

DAILY 5 CENTS, SUNDAY 15 CENTS

Sexual Discrimination Sample Title IX Complaint Procedures

COMPLAINT PROCEDURE

Problems and complaints of alleged sex discrimination, including sexual harassment, brought by students, employees, parents, other members of the community or applications for employment should be resolved in a prompt and equitable manner. If possible, such problems and complaints should be resolved in an informal manner. Students who need help or want to talk about harassment should see a school counselor. Employees who need assistance may contact either (male staff member) or (female staff member,) who are the superintendent's designees at _____ (telephone number.)

This complaint procedure is not applicable to situations for which other appeal and adjudication procedures are provided in state law or in school district policies and procedures.

Formal complaint shall mean the filing of a written complaint as described below, alleging that there has been an instance of sexual discrimination, including sexual harassment, in the educational program or activities of the district, which has not been eliminated, including employment therein and admission thereto.

Retaliation in any form for the filing of a complaint or the reporting of sexual discrimination including harassment is prohibited and shall not in any way affect the status, grades or work assignments of the person who reports such sexual harassment.

When a person wishes to file a complaint concerning sexual discrimination or sexual harassment, the following procedure shall be used.

LEVEL I

A complaint should first be presented informally to the person immediately involved in the alleged sex discrimination or sexual harassment. If the complaint is not promptly resolved at that level, or if the complainant elects not to present the complaint to the person involved, the complainant may present a written complaint to the supervisor of the person involved. Within five (5) days after receiving the complaint, the supervisor shall render his or her decision, which, unless requested otherwise by the complainant, shall be in writing with supporting evidence and reasons. However, if a complainant prefers not to utilize Level I at all, the complainant may file his or her written complaint immediately and directly with the Title IX Officer.



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LEVEL II

Within twenty (20) working days after receiving the decision at Level I, the complainant may appeal the decision to the district Title IX Office by filing a written appeal. The appeal of the Level I decision or the complaint filed directly with the Title IX Officer, shall be filed on a standard written complaint form available at all school and district offices. The location and phone number of the district Title IX Officer are:

Within twenty (20) working days after receiving the written complaint or the appeal of the Level I decision, the Title IX Officer shall receive and evaluate all relevant evidence relating to the matter and shall render a decision. The decision shall be delivered to the complainant.

LEVEL III

Within twenty (20) days after receiving the Level II decision, the complainant may appeal the decision to the Superintendent, utilizing the appeal form, which shall be attached to the decision. Within twenty (20) days after receiving the appeal, the Superintendent shall receive and evaluate all relevant evidence pertaining to the complaint and shall render a decision which, unless otherwise requested by the complainant, shall be in writing, with supporting evidence and reasons.

The complainant also has the right to contact the U.S. Office for Civil Rights for resolution of the complaint.



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SAMPLE TITLE IX COMPLAINT/APPEAL FORM

(To be used at Level II of Complaint Procedures only)

INDIVIDUAL	Name	_____
FILING	Position/title	_____
COMPLAINT	Work/ Location/Unit	_____

INDIVIDUAL	Name	_____
FILING	Position/title	_____
COMPLAINT	Work/ Location/Unit	_____

Type of Complaint			
<input type="checkbox"/> Sex Discrimination	or	<input type="checkbox"/> Sexual Harassment	
<input type="checkbox"/> Appeal of Level I decision	or	<input type="checkbox"/> Filed directly with the Title IX Officer	

Description of event(s) that caused you to file this complaint/appeal. (Give dates and all relevant information in sequential order. Attach any evidence.)

Signature of Complainant _____ Date _____

Decision of the Title IX Officer (including reasons and evidence)

Signature of the Title IX Officer _____ Date _____

