Series 3000: Operation, Finance, and Property

3100 General Operations

3118-F-1 Title IX Sexual Harassment Formal Complaint Form

	District Letterhead	
This form is being submitted by:	□ Complainant	☐ Title IX Coordinator
Complainant Name:		
Contact Information:		
If	the Complainant is a student:	
Date of Birth:	Grade:	
School Building Attending:		
If th	e Complainant is an employe	e:
Job Title:		Building:
	Complaint Details	
Reporter's Name (if different that	n Complainant):	
Reporter's Relationship to Com	olainant:	
Reporter's Contact Information:		
Respondent's Name (if known):		
Describe the alleged sexulinvestigate. Please be specified.	ual harassment that you ific. Describe the incident(olved. Describe or attach	

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2.	Describe the date/time/location	escribe the date/time/location(s) of the alleged incident(s).			
3.	What would you like the Distric	ct to do to remedy the s	situation?		
Complainant's/Coordinator's Signature		Date			
Ρl	lease submit this form to:				
		Title IX Coordinator			
		Big Jackson School			
		4020 13 Mile Road			

Paris MI 49338

A person alleging discrimination by the District on the basis of sex may file a complaint through the District's grievance procedure. A complaint may also be filed at any time with the Office for Civil Rights (OCR), U.S. Department of Education, 1244 Speer Boulevard, Suite 310, Denver, Colorado 80204-3582. Filing a complaint with the District is not a prerequisite to filing with OCR. For additional information about the District's grievance procedure, please contact the Title IX Coordinator identified above.