Worth County School District Title IX
Formal Complaint Form

This form serves as the Formal Complaint form to initiate a Title IX investigation and response under Worth County School District's Title IX Grievance Procedures. When the form has been completed and signed by the Complainant, and the Title IX Coordinator has also signed the complaint, your complaint has been received and noted by the Worth County School District. Reports may be filed anonymously but may impact the Worth County School District's ability to investigate and respond to the complaint.

Please indicate your status with the Worth County School District: ϒ Staff ϒ Student ϒ Employment Applicant ϒ Student Applicant ϒ Other, Explain: _____ _	Name:_____ Cell phone:_____Home phone:_____ Address:_____ _____ Email Address:_____ _____ School: _____
Complaint relates to: ϒ Dating Violence ϒ Domestic Violence ϒ Gender Identity or Expression ϒ Gender/Sex ϒ Retaliation under Title IX ϒ Sexual Assault/Battery/Rape ϒ Sexual Harassment ϒ Sexual Orientation or Expression ϒ Stalking ϒ Other, Explain:_____ _	**Complaint**: Describe your complaint as clearly and concisely as possible. Please provide any relevant dates and a description of where the incident occurred. Important facts include who, what, when and where. Please attach additional pages describing your complaint if necessary. Date of incident: _____ Where did the incident occur: Other Information on Incident: _____ _ _____ _ _____ _ _____ _ _____ _ _

_____ _____	_____ _ _____ _ _____ _ _____ _ _____ _ _____ _ _____ _ _____ _ _____ _ _____ _ _____ _

Name of person you believe violated Title IX and how you have contact with them (e.g. classmate, teacher, administrator, co-worker, school visitor or other): _____ _____ _____ _____ _____
How would you like this resolved? (Attach additional pages if necessary) _____ _____ _____ _____ _____
For retaliation complaints, please explain what actions you believe lead someone to retaliate against you:

_____
_____
_____
_____
_____

Witnesses (name, relationship to you and phone number):

1._____
2._____
3._____
_____

(Attach additional pages if necessary)

Have you brought this matter to the attention of any employee of the Worth County School District? If so, please list the name(s) and school(s)/department(s) of all other employees with whom you have discussed this matter and when this discussion occurred:

_____
_____
_____

I certify the information contained in this Formal Complaint is true and correct to the best of my knowledge.

X_____ Date: _____

For Administration to complete

Complaint received by: _____

Signature:_____Date:_____

Other notes: