

FORMAL COMPLAINT OF TITLE IX SEXUAL HARASSMENT

Instructions:

Any individual who is participating or attempting to participate in the education program or activities of the school system who believes that they have experienced Title IX sexual harassment may initiate the grievance process by filing a formal written complaint on this form. This form should be completed by the Complainant. If the Complainant is a student, the form may also be completed by a parent or guardian of a Complainant or the Title IX Coordinator. This form should be submitted to the Title IX Coordinator by hand delivery, mail, fax, or e-mail at the following address:

Edwina Ashworth
Randolph County School System
2222-C S. Fayetteville Street
Asheboro, North Carolina 27205 Phone 336.378.8800
Phone: (336) 633-5123
E-mail: eashworth@randolph.k12.nc.us

Formal Complaint:

Individual Completing Form:

Status: Complainant _____ Parent/Guardian of Complainant _____ Title IX Coordinator

Name of Complainant : _____
Status: _____ Student _____ Employee _____ Other (Please specify): _____

School of Complainant (if applicable): _____

Position Title of Complainant (if applicable): _____

Grade Level of Complainant (if applicable): _____

Parent/Guardian of Complainant (if applicable)(s) (if student-complainant) _____

Address: _____

Phone Number: _____

E-mail address: _____

Name of Respondent(s): _____
Status: _____ Student _____ Employee _____ Other: _____

Did any of the incidents of sexual harassment occur on school property?
Yes _____ No _____

Did any of the incidents of sexual harassment occur at a school-sponsored event?
Yes _____ No _____

Please describe the sexual harassment you experienced (attach additional sheets if needed):

Date(s) of incident(s) of sexual harassment: _____

Location(s) of incident(s) of sexual harassment: _____

Please list all known witnesses to the sexual harassment, and indicate whether the witness is a RCSS student or employee:

Please provide any additional information you wish to convey as part of this Title IX Formal Complaint (attach additional sheets if needed):

Signature

By signing below, the Complainant formally requests that school officials investigate the allegation(s) described on this form. The Complainant understands that submission of this form initiates a Title IX grievance process. The Complainant represents that the information in this formal complaint is true and accurate to the best of their knowledge and belief.

Signature of Complainant

Date: _____

Signature of Parent/Guardian of
Complainant (if applicable)

Date: _____

Alternative to Complainant Signature

By signing below, the Title IX Coordinator acknowledges that it would be deliberately indifferent to ignore the allegation(s) described above and that the Complainant has not chosen to file a formal complaint.

Signature of Title IX Coordinator

Date: _____