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 studer	nt:
Date of Birth:	Grade	e:
School Building Attending:		
	Complainant is an employ	
Job Title:		_ Building:
	Complaint Details	
Reporter's Name (if different than	Complainant):	
Reporter's Relationship to Compla	inant:	
Reporter's Contact Information:		
Respondent's Name (if known):		
Describe the alleged sexual investigate. Please be specific	harassment that your control of the harassment that your control of the harassment that you harassment har	

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2.	Describe the date/time/location(s) of the alleged incident(s).
3.	What would you like the District to do to remedy the situation?
Cc	omplainant's/Coordinator's Signature Date

Please submit this form to:

Lisa Anderson
Deputy Superintendent
Gull Lake Community Schools
10100 East D Avenue
Richland MI 49083
landerson@gulllakecs.org
269.548.3421

Drew Bordner
Assistant Superintendent of Curriculum & Instructional Technology
10100 East D Avenue
Richland MI 49083

dbordner@gulllakecs.org
269.548.3422

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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.