



North Little Rock School District

2400 Willow Street • North Little Rock, Arkansas 72114 • (501) 771-8000 • www.nlrsd.org

Title IX Discrimination Formal Complaint Form

- Complainant: An individual who is alleged to be the victim of sexual harassment.
- Respondent: An individual who is alleged to be the perpetrator of sexual harassment.
- Formal Complaint: A document filed by a Complainant (or parent/guardian) or signed by the Title IX Coordinator alleging sexual harassment against a Respondent and requesting that the District investigate the allegation.

Complainant Personal Information:

Case Number: _____

Reporter Name: _____

Email: _____

Address: _____

Phone Number: _____

Employee/Student ID: _____

Campus: _____

Job Title: _____

Employee or Student School/Office Location: _____

Type of Prohibited Conduct:

Discrimination based on: (Check all that apply)

Sexual Harassment Sexual Assault Gender Based Harassment Dating Violence

Stalking Retaliation Cyber Bullying Other

Date Incident Occurred:

Earliest: _____

Latest: _____

Continuing Action

Phone Number: _____ Email: _____

Student/Employee: _____

Did the reporter discuss the with any witness previously identified? Yes No

Name: _____ Date: _____

Method of Communication: _____

Please identify any administrators, district employees, or law enforcement agency to whom a report has been made:

Reported to Name: _____ Date: _____

Describe how concerns were reported: _____

Results: _____

Complaint taken by: _____ Date: _____

I certify the aforementioned is true and correct.

Your Signature

Date

Title IX Coordinator's Signature

Date