

NORTHWESTERN LOCAL SCHOOL DISTRICT

5610 TROY ROAD
SPRINGFIELD, OHIO 45502
P: (937)964-1318

Title IX Formal Complaint Form

PURPOSE: The purpose of the Title IX Formal Complaint Form is to request the District investigate of allegations of sexual harassment in violation of Title IX of the Education Amendments of 1972 ("Title IX").

INSTRUCTIONS: Individuals alleging Title IX sexual harassment and requesting an investigation may complete this form to the best of their ability and submit it to the Title IX Coordinator as soon as possible after the occurrence of the alleged harassment.

1. Name of Complainant (Alleged Victim): _____

Home Address: _____

Phone: _____ Email Address: _____

School: _____ Grade: _____

2. Name of Respondent (Alleged Perpetrator): _____

3. Nature of Complaint: Please describe the action(s) you believe constitute sexual harassment, including complaints of sexual violence, in violation of Title IX and identify with reasonable particularity any person(s) you believe may be responsible. Please attach additional sheets, if necessary:

See additional page(s) (attached to this Complaint Form)

4. When did the actions described above occur? _____

5. Are there any witnesses to this matter? Yes No

If yes, please identify the witness(es):

7. Have you reported your allegations of sexual harassment to any teacher(s), administrator(s), or other District staff member(s)?

If yes, please identify:

Person to whom you have spoken: _____

Date: _____ Method of communication: _____

8. Please describe below or attach any sources of information that you feel are relevant to your complaint:

[illegible]

I certify that the foregoing information is true and correct.

Print Name

Signature

Please submit this form to:

Sharon Saunders
Title IX Coordinator
Northwestern Local Schools
5610 Troy Road
Springfield, Ohio 45502
937-964-1318 ext 3123