

Sturgeon R-V Schools

“All Bulldogs Succeed in Learning Through Commitment, Teamwork and Accountability”

210 W Patton Street
Sturgeon, Missouri 65284

Phone (573) 687-3515
Fax (573) 687-2116

TITLE IX FORMAL COMPLAINT FORM

I, _____, am filing a formal complaint of sexual harassment regarding
_____ [insert name].

I am requesting that the School District investigate this allegation of sexual harassment. The conduct, as alleged, constitutes sexual harassment that satisfies [*CHECK ALL THAT APPLY*]:

_____ An employee of the school district conditioned the provision of an aid, benefit, or service on my participation in unwelcome sexual conduct.

_____ Unwelcome conduct that would be determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the School District’s education program of activity

_____ Sexual assault

_____ Dating Violence

_____ Domestic Violence

_____ Stalking

DETAILS OF ALLEGATIONS

The following details are the details of the allegation(s) known at this time. If the details are unknown, please designate them as “unknown at this time”.

Administration

Dr. Melia Franklin, *Superintendent* ♦ Ms. Jennifer Campbell, *Secondary Principal* ♦ Ms. Jamie Boyd, *K-8 Principal*
Mr. Michael Smith, *Dean of Students* ♦ Mr. Jesse Stewart, *K-8 Asst. Principal* ♦ Mr. Jeff Carr, *Director of Operations*
Mrs. Christina Ridgeway, *Director of Special Education*

Board of Education

Misty Doss, *President* ♦ Denise Flaspohler, *Vice President* ♦ Bethany Stone, *Treasurer* ♦ Peggy Leerhoff, *Secretary*
Dean Jones, *Member* ♦ Kenneth Ladyman, *Member* ♦ Freedom Pollard, *Member* ♦ Ben Pollock, *Member*

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Allegation

a. Identity of Respondent: The individual who is being reported to be the perpetrator of conduct that could constitute sexual harassment is _____.

b. Identity of Complainant: The individual who is reporting to be the victim of conduct that could constitute sexual harassment is _____.

c. Conduct Allegedly Constituting Sexual Harassment:

This is Sturgeon

A D I S T R I C T O F C H O I C E

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[Please attach additional pages, if necessary]

d. Date of the Alleged Incident: The conduct is alleged to have occurred on the following date:

_____.

e. Location of the Alleged Incident: The conduct is alleged to have occurred at the following location:

_____.

You may file this formal complaint with the Title IX Coordinator in person, by mail, or by e-mail. The Title IX Coordinator can be reach at:

Christina Ridgeway
Director of Special Education/Title IX Coordinator
210 W. Patton St. Sturgeon, MO 65284
cridgeway@sturgeon.k12.mo.us
573-687-3515 option 4

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Upon receiving your formal complaint, the Title IX Coordinator will promptly contact you. Please provide your contact information.

Name: _____

Email Address: _____

Phone Number: _____

Name

Signature

Date

Name of Parent or Legal Guardian(Optional)

Signature of Parent or
Legal Guardian (Optional)

Date

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