

Arkansas Arts Academy
TITLE IX DISCRIMINATION COMPLAINT FORM

Title IX of the Education Amendment of 1972 (20 U.S.C. 1681) is an all-encompassing federal law that prohibits discrimination based on the gender of students and employees of educational institutions which receive federal financial assistance. Once the form is completed and signed by you and the Title IX Coordination, your complaint has been properly received and noted by the District. We will provide you with a copy of this form as well as complete information about the Title IX complaint process. The Title IX Coordinator and/or designee can investigate complaints by faculty, staff, and students who believe themselves to be harmed by sexual harassment or discrimination and harassment related to gender.

Arkansas Arts Academy Title IX Coordinator: David Skelton, 479-877-1797,
dskelton@artsk12.org , 1110 W. Poplar Street, Rogers, AR 72756

I am completing this form as a (check one): <input type="checkbox"/> Staff <input type="checkbox"/> Student <input type="checkbox"/> Other		
Name	Campus	
Home Phone	Work Phone	
Home Address		
City	State	Zip Code

Have you brought this matter to the attention of any other district employee? If so, please list the name(s) of all other persons with whom you have discussed this matter.

Complaint: Describe your complaint. Please summarize below and attach additional pages describing your complaint if necessary.

Name of person or persons you believe committed the offense against you and how you have contact with them, e.g. supervisor, co-worker, faculty, student.

For retaliation complaints, please explain why you believe someone against you:

Witnesses (The relationship requested means co-worker, supervisor, student, or staff.

Name	Relationship	Phone Number
1.		
2.		
3.		

I certify that the aforementioned is true and correct.

Your Signature

Printed Name

Date

For the Title IX Coordinator and/or Designee
Complaint taken by:

Signature

Printed Name

Date