

REPORT OF TITLE IX VIOLATION

Report No. _____

Name of Reporting Person _____

(check one) _____ student _____ parent/guardian _____ employee _____ other/ _____

Basis for Report (check one) _____ Information from student/name: _____
_____ Information from non-student/name: _____
_____ Personal knowledge

Name(s) of Alleged Victim(s) _____

Name(s) of Alleged Harasser(s) _____

Name(s) of Alleged Witness(es) _____

Description of Alleged Sexual Harassment/Retaliation (Must include specific act(s),
circumstances, date, time, and other details known which give cause to believe that sexual
harassment and/or retaliation has occurred. Separate written statement may be attached.)

Additional Information (Should include all other information known which may assist in
investigation of report, such as how and when reporting party/source learned of reported facts,
above, names of other persons who may have related information, etc. Separate statement may be
attached.)

Signature of Reporting Person _____ Phone No. _____

Date Submitted _____ Time Submitted _____ Email _____

Signature of Principal or designee _____ Date/Time Received _____

NEXT STEP: STEP 1 INVESTIGATION