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Superintendent
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Shelley Palmer
President
Board of Education

Form A – Formal Title IX Complaint Form

If you believe that you or your child have been subjected to sexual harassment, you are encouraged to complete this Formal Title IX Complaint Form to the best of your ability and submit it to the Title IX Coordinator in person, electronically, or by mail. The District’s Title IX Coordinator is the Director of Student Services, and can be contacted as follows:

Address: 1477 South Schodack Road
Castleton-on-Hudson, NY, 12033
Phone (518) 732-2523
Email Title9Coordinator@schodack.k12.ny.us

Once Form A is submitted, the Title IX Coordinator will reach out to you to (1) discuss the availability of supportive measures, (2) consider your wishes with respect to supportive measures, (3) inform you of the availability of supportive measures with or without the filing of a Formal Title IX Complaint, and (4) explain the process for filing a Formal Title IX Complaint. If, after discussing the Formal Title IX Complaint process with the Title IX Coordinator, you decide to file the Formal Title IX Complaint, you must complete and submit Form B in addition to this form. You will not be retaliated against for filing Form A or a Formal Title IX Complaint.

YOUR INFORMATION

Your Name: _____

Date of complaint: _____

Student, employee, or parent/guardian: _____

Name of student (for parents/guardians): _____

Relation to student (for parents/guardians): _____

Home Address: _____

Home or Cell Phone: _____

Email: _____

School/Work Location: _____

Grade/Class (for students): _____

Job Title (for employees): _____

Supervisor (for employees): _____

Work Phone (for parents/guardians/employees): _____

Preferred Communication Method (**please circle one**):

phone

email

mail

in person

COMPLAINT INFORMATION

1. Your complaint of Sexual Harassment is made against:

Name: _____

Job Title (if an employee): _____

Grade/Class (if a student): _____

School Address/Work Location (if known): _____

Phone (if known): _____

Relationship to you (please circle one below):

Teacher / Other staff member / Other Student / Other: _____

(Please use additional sheets of paper if the complaint is against multiple people.)

2. Please describe what happened and how it is affecting you and your education or employment. If multiple incidents occurred, please describe each incident. Please use additional sheets of paper if necessary and attach any relevant documents or evidence.

3. Date(s) and location(s) sexual harassment occurred:

Is the sexual harassment continuing? ____ Yes ____ No

4. Please list the name and contact information (if known) of any witnesses or individuals who may have information related to your complaint:

The following question is optional, but may help the District's investigation.

5. Have you previously complained about or provided information (verbal or written) about sexual harassment or related incidents to the District? ____ Yes ____ No

If yes, when and to whom did you complain or provide information?

If you have retained legal counsel and would like us to work with them, please provide their contact information.

Form B – Consent to Submit a Formal Title IX Complaint

Complete and sign (either electronically or in writing) below only after (1) you have submitted Form A to the Title IX Coordinator, and (2) the Title IX Coordinator has provided you with a copy of the Policy #0111 Formal Title IX Complaint and advised you about the consequences of filing a Formal Title IX Complaint.

By signing below, you acknowledge that you have discussed the options for making a Formal Title IX Complaint and the grievance process with the Title IX Coordinator, and have chosen to file a Formal Title IX Complaint with the District.

Your signature also acknowledges that, although the District will make every effort to maintain confidentiality, once you file a Formal Title IX Complaint, the District is required to provide written notice to the individual(s) named in your complaint that contains sufficient details of the conduct alleged, and to advise the respondent(s) that they are presumed not responsible for such conduct unless and until a final determination is made after an investigation.

If you choose not to sign below, but the allegations in Form A are of a serious nature, the Title IX Coordinator may choose to sign and submit the Formal Title IX Complaint, and proceed with the Formal Title IX Complaint process and procedure.

Even if you sign and submit a Formal Title IX Complaint, you may choose to withdraw it at any time by notifying the Title IX Coordinator of the withdrawal in writing.

If the District determines that the conduct alleged in Form A (1) would not constitute Title IX Sexual Harassment under Policy #0111, Formal Title IX Complaint, (2) did not occur in the District’s education program or activity, or (3) did not occur against a person in the United States, then the District will dismiss the Formal Title IX Complaint. However, if the Formal Title IX Complaint is dismissed, the District can still investigate the allegations in Form A under other District policies or regulations and/or the Code of Conduct.

By signing below, I acknowledge the information listed above and affirm that the allegations in Form A are true and accurate.

Print Name: _____

Signature: _____

Date: _____