

Title IX Formal Complaint Instructions

Title IX of the Education Amendments Act is a federal law that prohibits sex discrimination of students and employees of Kingsland Public Schools (KPS), including sex discrimination, sexual harassment and other sexual misconduct (such as sexual assault, stalking, and dating or domestic violence) in an educational program or activity. The District will take all acts in violation of Title IX very seriously, and the District will make every reasonable effort to handle and respond to every Title IX complaint filed by students or employees in a prompt, fair, thorough, and equitable manner.

You may have an advisor of your choice throughout the complaint process. This individual can be a parent, legal guardian, family member, attorney or any other person of your choice, provided the advisor is not an individual directly related to the incident of alleged misconduct or if their presence during the complaint process creates a conflict of interest. If you would like the District to assign an advisor, at no cost, please let us know.

Additionally, there are supportive measures available to you during the formal complaint process. These non-punitive and non-disciplinary supportive measures may include, but are not limited to, modifications to work or course schedules, a leave of absence or increased monitoring of the educational program or work environment.

Enclosed is Policy 522 Title IX Sex Nondiscrimination Policy, Grievance Procedure and Process for your review. The Policy may answer most, if not all, of your questions regarding the Title IX formal complaint process.

Definitions.

1. Complainant – An individual who is alleged to be the victim of conduct that could constitute sexual harassment.
2. Respondent – An individual who is reported to have exhibited conduct that could constitute sexual harassment.
3. Witness – An individual who may have observed conduct that could constitute sexual harassment or has knowledge about the incident.

Instructions: Complete the attached form, providing as much detail as possible, so that the complaint may be properly investigated. Please provide detailed information that describes the conduct that supports the allegations of sex discrimination, sexual harassment and other sexual misconduct. Please also identify with reasonable particularity the Respondent(s) and any witnesses to the alleged conduct. It is important that you report the facts as accurately as possible and that you cooperate fully with the persons designated to investigate the complaint. As a reminder, the District prohibits knowingly making false statements or knowingly submitting false information during the complaint process. If you are unable to complete this form for any reason, and would like to make a verbal report, please contact the Title IX representative below.

Preservation of Documents or Other Information: You are requested to preserve all documents or information that might support the allegations of sex discrimination, sexual harassment or other sexual misconduct. Such evidence may include, but is not limited to:

1. Documents;
2. Electronically communications (ex. text messages, emails, Facebook, Instagram, Snapchat or other social media posts, to the extent that they can be captured or preserved);
3. Photographs;
4. Videos;
5. Audio recordings; and
6. Other documentation that might be helpful or relevant in the investigation.

Confidentiality: Although the District cannot commit to keeping a Title IX formal complaint confidential because of the District's obligation to investigate the complaint, the District will use its best efforts not to disseminate information concerning the complaint beyond those who have a need to know.

Retaliation prohibited: Retaliation against an individual who files a formal complaint is strictly prohibited by the District and is grounds for disciplinary action.

Where to submit: Please submit this form to:

Primary Coordinator

Scott Klavetter, District Title IX Coordinator
Office Mailing Address: Kingsland Public Schools, ISD No. 2137
705 North Section Avenue
Spring Valley, MN 55975
Phone: 507-346-7276
Email Address: klavetter.scott@kingsland2137.org

Alternate Coordinator

Dana Simmons, Alternate District Title IX Coordinator
Office Mailing Address: Kingsland Public Schools, ISD No. 2137
705 North Section Avenue
Spring Valley, MN 55975
Phone: 507-346-7276
Email Address: simmons.dana@kingsland2137.org

Once you have completed this formal complaint form, the Title IX representative above will contact you shortly thereafter. You may also contact him/her should you have any questions or concerns or if you believe you are experiencing retaliation.

TITLE IX FORMAL COMPLAINT

Title IX of the Education Amendments Act is a federal law that prohibits sex discrimination of students and employees of KPS, including sexual harassment and other sexual misconduct (such as sexual assault, stalking, and dating or relationship violence). In compliance with Title IX and other federal laws, KPS does not tolerate sex discrimination, harassment or sexual misconduct against students or employees in educational programs or activities. **If you have experienced sexual discrimination, harassment or other sexual misconduct, the District wants to know so we can take appropriate action. Please complete this form to the best of your ability, and return the form to Title IX Coordinator identified in the instructions or the appropriate Title IX Administrator. You may also make a verbal complaint to the Title IX Coordinator, if you are unable to complete this form for any reason.**

NAME: _____ **DATE:** _____

ADDRESS: _____
STREET CITY STATE ZIP CODE

HOME/WORK PHONE: () _____ **CELL PHONE:** () _____

EMAIL ADDRESS: _____ **OTHER EMAIL ADDRESS:** _____

STATUS: *(Please check one):* ☐ CURRENT STUDENT ☐ PARENT/LEGAL GUARDIAN
☐ CURRENT EMPLOYEE ☐ OTHER: _____

IF STUDENT: Student ID: _____ School: _____ Grade: _____

IF EMPLOYEE: Employee ID: _____ School/Department: _____

TYPE OF COMPLAINT (Check all that apply):

- ☐ Sex Discrimination ☐ Sexual Harassment ☐ Sexual Assault ☐ Other _____
☐ Domestic Violence ☐ Dating Violence ☐ Stalking

PLEASE LIST THE NAME(S) OF ANYONE, INCLUDING DISTRICT EMPLOYEES, TO WHOM YOU HAVE COMPLAINED ABOUT THE ALLEGED MISCONDUCT:

Name of person(s), school or department, job title (if apply), education program or activity, describe the complaint and when and where the complaint occurred

PLEASE DESCRIBE THE INCIDENT OF ALLEGED MISCONDUCT. *Please attach additional pages if necessary.*

Identify the person(s) you believe committed the sex discrimination, harassment or other sexual misconduct (*include name, telephone, address, if known*): _____

Identify the school or education program or activity: _____

Describe what happened:

When did it happen? _____

Where did it happen? _____

Were there any witnesses to the incident? If so, please list their names, email addresses, telephone numbers and relationship to Complainant, if known

Is this the first incident? ☐ Yes ☐ No If the answer is "No," please state when, where and how many times the misconduct has happened before: _____

Has there been any efforts to stop the alleged misconduct prior to this complaint? ☐ Yes ☐ No

If the answer is "Yes," please describe the efforts taken to stop the alleged misconduct or incident, by whom, when and where: _____

Please state your desired outcome or remedy in response to this complaint: _____

Are you aware of any documentation to support the alleged misconduct occurred? ☐ Yes ☐ No

If the answer the previous questions is "Yes, please describe the document below (including but not limited to notes, letters, reports, photos, emails, text messages, Facebook postings, audio recordings, etc.)

Are you in possession of the documents describe above, if any? ☐ Yes ☐ No

If the answer is "No," please tell us who
possesses the documents _____

PLEASE ATTACH DOCUMENTS, IF ANY, THAT YOU BELIEVE SUPPORT YOUR ALLEGATIONS THE ALLEGED MISONDUCT OCCURRED.

I certify all statements made in this complaint are true and correct.

Complainant Signature

Date

Printed Name

Parent/Legal Guardian Signature
(if Complainant is a minor)

Date

Printed Name

Title IX Coordinator

Date Received