

**PROHIBITION OF RACE AND SEX DISCRIMINATION IN CURRICULUM  
AND COMPLAINT PROCESS  
COMPLAINT FORM**

Submit the following form and any documentation to Julie Holloway, Turkey Ford School District Superintendent, [jholloway@turkeyford.net](mailto:jholloway@turkeyford.net)

This must be submitted in writing either in person or via email.

On the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_ (Name of Employee) violated 70 O.S. § 24-157(B) by requiring or making a part of a course, program, or activity offered by the district one or more of the following discriminatory principles (circle all that apply):

- (1) One race or sex is inherently superior to another race or sex,
- (2) An individual, by virtue of his or her race or sex, is inherently racist, sexist or oppressive, whether consciously or unconsciously,
- (3) An individual should be discriminated against or receive adverse treatment solely or partly because of his or her race or sex,
- (4) Members of one race or sex cannot and should not attempt to treat others without respect to race or sex,
- (5) An individual's moral character is necessarily determined by his or her race or sex,
- (6) An individual, by virtue of his or her race or sex, bears responsibility for actions committed in the past by other members of the same race or sex,
- (7) Any individual should feel discomfort, guilt, anguish or any other form of psychological distress on account of his or her race or sex, or
- (8) Meritocracy or traits such as a hard work ethic are racist or sexist or were created by members of a particular race to oppress members of another race.

An explanation of the alleged violation, how the alleged violation occurred, and relevant information to enable the district to investigate the alleged violation includes, but is not limited to (add additional pages if necessary):

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Optional: The following individuals are witnesses the district may interview:

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I, \_\_\_\_\_, attest that the information that I have provided above is correct and accurate.

Dated this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Name of Complainant