

# TITLE IX

## Policies, Complaint, and Investigation Forms

NOTE: Forms patterned after Underwood Law Firm as per presentation to Region 16, Aug 13, 2020

**PURPOSE:** The purpose of the Title IX formal complaint process is to inform the District of allegations of sexual harassment, sexual violence and sex discrimination in violation of Title IX of the Education Amendments of 1972 (Title IX) so that the District may take appropriate action.

**INSTRUCTIONS:** Individuals alleging Title IX sexual harassment and requesting a review are required to complete this form and submit it to the Title IX Coordinator as soon as possible after the occurrence of the alleged harassment.

- 1. Name of Complainant:** \_\_\_\_\_  
Home  
address \_\_\_\_\_  
City, State,  
Home Phone \_\_\_\_\_
- 2. Name of Respondent:** \_\_\_\_\_
- 3. Nature of Complaint:** In the space below, please describe the action(s) you believe may be sexual harassment, including complaints of sexual violence, in violation of Title IX and identify with reasonable particularity any person(s) you believe may be responsible. Please attach additional sheets, if necessary:

4. **When did the actions described above occur?** \_\_\_\_\_

5. **Are there any witnesses to this matter?** \_\_\_\_\_yes \_\_\_\_\_no

If yes, please identify the witness (es):

6. **Did you discuss this matter with any of the witnesses identified in item 5?**

\_\_\_\_\_ yes \_\_\_\_\_no

If yes, please identify the person to whom you have spoken:

\_\_\_\_\_

Date: \_\_\_\_\_ Method of communication \_\_\_\_\_

7. **Have you spoken to any administrator(s) or other district staff member(s) about this matter?** \_\_\_\_\_yes \_\_\_\_\_no

If yes, please identify the person to whom you have spoken:

\_\_\_\_\_

Date: \_\_\_\_\_ Method of communication \_\_\_\_\_

8. **Please describe below or attach any sources of information that you feel are relevant to your complaint:**

**I certify that the foregoing information is true and correct.**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

***Texline  
School***

302 E. Pine Street,  
Texline, TX 79087



***Independent  
District***

P.O. Box 60

Phone 806-362-4284 Fax 806-362-4938

Superintendent- Terrell Jones

Principal-Ross Perschbacher

[Name]

[Address]

RE: Notice of Formal Title IX Complaint

Dear \_\_\_\_\_,

Please be aware that a formal complaint of sexual harassment in violation of Title IX of the Education Amendments of 1972 ("Title IX") has been filed against [Respondent] ("Respondent"). The purpose of this correspondence is to provide all parties with notice of the allegations and to provide certain other information as required by law and to advise you that you may prepare a response to this complaint before any initial review with the investigator.

The allegations are as follows....[This must include sufficient detail to permit respondent to prepare a response. Specifically, include names of the parties, the conduct alleged to be sexual harassment, and the date and location of the conduct].

These allegations will be the subject of an investigation, which will be conducted in accordance with District Board Policy and applicable law. If the parties agree, this complaint may be resolved through the informal resolution process without the need for the investigation. At the conclusion of the investigation, all parties will have the right to appeal any decisions made as a result of the complaint process.

This correspondence is not a conclusion regarding the veracity of the above allegations. The Respondent (against whom the allegations are brought) is presumed not responsible of the conduct until the formal complaint process is completed. A determination regarding responsibility, based on a preponderance of the evidence, will be made at the conclusion of the formal complaint process. All determination related too responsibility for the alleged conduct will be made using a preponderance of the evidence standard.

All parties are entitled to submit evidence and inspect and review the evidence presented in this matter. You are entitled to an advisor of your choice who may be present at any investigation interviews and may also inspect and review evidence presented. This person may be, but is not required to be, an attorney. Each party will have an opportunity to ask written questions of the other party before a determination is made.

Please be aware that Board Policy and the [District Student Code of Conduct/Student Handbook/Employee Handbook] expressly prohibit intentionally making a false claim of a Title IX violation and prohibit retaliation against any person who files a complaint or participates in the Title IX complaint process. A copy of the relevant provisions thereof is attached to this letter.

Thank you for your time and attention to this matter. Please feel free to reach out to me if you have any questions for concerns.

## RESPONSE CHECKLIST FOR TITLE IX

<b>Complainant:</b>	_____
<b>Respondent:</b>	_____
<b>Investigator:</b>	_____
<b>Campus:</b>	_____

[NOTE: Documentation of all actions below is essential.]

District Policies Implicated (List):	
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Date/Response/ Information	Action
	Date Report/Compliant of allegations received.
	Name/Title of person who received Report/Complaint.
	Date Report/Complaint received by Title IX coordinator.
	Does conduct, if proven, constitute sexual harassment? (see policy DIA, FB, FFH)
	Does conduct, if proven, constitute bullying? (see Policy FFI) If so, contact the appropriate administrator.
	Does conduct, if proven, constitute disability discrimination? (see Policy DAA, FB, FFH) If so, contact the ADA/Section 504 Coordinator immediately.
	Does the conduct, if proven, constitute other discrimination? (see Policy FB, FFH DAA) If so, contact the appropriate administrator.

<b>Date/Response/ Information</b>	<b>Action</b>
	Does conduct, if proven, lead to a reasonable belief that a child has been or may be abused or neglected? If so, contact law enforcement and/or CPS within 48 hours of forming that belief.
	Date of communication with Complainant to discuss supportive measures and advise about formal complaint procedure.
	Date and description of supportive measures for Complainant (if any)
	Date of communication with Respondent to discuss supportive measures.
	Date and description of supportive measures for Respondent (if any)
	Date formal complaint filed.
	Date notice of formal complaint provided to all parties.
	Date of review of formal complaint allegations (consider reasons for dismissal).
	Date investigation initiated.
	Interview with and statement from Complainant.
	Interview(s) with and statement(s) from Complainant's witnesses.
	Interview with and statement from Respondent.
	Interview(s) with and statement(s) from Respondent's witnesses.
	Date preliminary investigation report and evidence provided to both parties.
	Date response to preliminary investigation report is due.
	Date response to preliminary investigation report received from Complainant, if any.
	Date response to preliminary investigation report received from Respondent, if any.
	Date final investigation report provided to both parties (must be same time) and Title IX coordinator.
	Date submission of questions from either party is due.
	Date questions received from Complainant, if any.
	Date questions received from Respondent, if any.

<b>Date/Response/ Information</b>	<b>Action</b>
	Date responses to questions are due, if applicable.
	Date written determination by decision-maker provided to both parties and Title IX coordinator.
	Deadline for appeal of determination by decision-maker
	Date disciplinary or corrective action taken.

# Witness Statement

Name of Witness: \_\_\_\_\_

Student \_\_\_\_\_ Employee \_\_\_\_\_ Parent \_\_\_\_\_ Other \_\_\_\_\_

Date if incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Persons Involved: \_\_\_\_\_

Other Witnesses: \_\_\_\_\_

**Detailed description of events (continue on back or use additional sheets, if needed): What happened? Who was present? Where and when did it happen? Who said what? What did you see or hear? What was your impression of the event? Who else knows about that happened? How do they know?**

**I certify that the foregoing information is true and correct.**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Sexual Harassment Investigation Report

**1. Identification of Parties:**

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

Name(s) of Respondent(s): \_\_\_\_\_

Name(s) of Investigator(s): \_\_\_\_\_

Name(s) of Witness(es): \_\_\_\_\_

**2. Date of Report of allegations or Formal Complaint:** \_\_\_\_\_

**3. Date Investigation Initiated:** \_\_\_\_\_

**4. Summary of Allegation(s), (continue on back or use additional sheets, if needed)::**



**5. Notifications and Communications Provided: (Notice of Complaint, etc.)**

**6. Supportive Measures: (Description and Date offered)**

**7. Emergency Removal/Administrative Leave: (to be used only if there is an identifiable immediate threat to physical safety)**

**8. Prohibited Conduct Alleged:**

The following prohibited conduct was alleged (see description on next page)

- Quid pro quo                       Hostile environment
- Sexual assault, dating violence, domestic violence, or stalking
- Harassment as defined in FFH(LOCAL)

See policy FFH (LOCAL) for additional information regarding sexual harassment and the conduct of this investigation.

NOTE: The presumption is that the Respondent (the person accused of misconduct) is not responsible for the alleged misconduct.

**Quid Pro Quo Harassment** is harassment that involves an employee of the recipient conditioning the provision of the aid benefit, or service of the recipient on an individual's participation in unwelcome sexual conduct.

**Hostile environment Harassment** is harassment that involves unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the recipient's education program or activity.

**Sexual Assault** (as defined in 34 U.S.C. 12291(a)(10) means violence committed by a person: (A) who is or has been in a social relationship of a romantic or intimate nature with the victim; and (B) where the existence of such a relationship shall be determined based on a consideration of the following factors: (i) the length of the relationship, (ii) The type of relationship, or (iii) The frequency of interaction between the persons involved in the relationship.

**Domestic violence** (as defined in 34 U.S.C. 12291 (a)(8) includes felony or misdemeanor crimes of violence committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner, by a person similarly situated to a spouse of the victim under the domestic of family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic of family violence laws of the jurisdiction.

**Stalking** (as defined in 34 U.S.C. 12291(a)(30): means engaging in a course of conduct directed at a specific person that would cause a reasonable person to: (A) fear for his or her safety or the safety of others: or (B) suffer substantial emotional distress.

**Prohibited harassment** of a student is defined as physical, verbal, or nonverbal conduct based on the student's **race, color, religion, gender, national origin, disability, or any other basis prohibited by law** that is so severe, persistent, or pervasive that the conduct:

- (1) Affects a student's ability to participate in or benefit from an educational program or activity, or creates an intimidating, threatening, hostile, or offensive educational environment;
- (2) Has the purpose of effect of substantially or unreasonably interfering with the student's' academic performance, **or**
- (3) Otherwise adversely affects the student's educational opportunities.



**10. Other Investigation Resources: (documents reviewed, video reviewed, etc.)**

**11. Investigation Timeline: (document all actions taken in investigation, include startte date and date completed)**

**12. Findings of Fact Regarding the Determination: Attach additional pages if needed.**

**13. Application of Allegations to Definitions, Policy(ies) & student Code of Conduct:**

**14. Conclusion/Determination:**

After completing a thorough and thoughtful investigation, and after considering the application of the allegations to applicable definitions, policy(ies) and the Student Code of Conduct provisions, it is my determination that the following:

Sexual harassment by (select appropriate method)

**Occurred:**             Quid pro quo             Hostile environment  
 Sexual assault, dating violence, domestic violence, or  
stalking  
 Harassment as defined in FFH(LOCAL)

**Did not Occur:**     Quid pro quo             Hostile environment  
 Sexual assault, dating violence, domestic violence, or  
stalking  
 Harassment as defined in FFH(LOCAL)

**Additional Comments (if any);**

**15. Additional Requirements for Sexual Harassment/Harassment Incidents:**

Special Education Considerations:

- Does the student who engaged in bullying receive special education services?

\_\_\_\_\_ Yes          \_\_\_\_\_ No

If yes, an ARD Committee meeting must be convened before disciplinary action may be taken. See Texas Education Code 37.001(b-1)

**16. Notification of Finding:**

(Note: Notification must be sent to all parties. Notice must be sent before a hearing, if applicable)

Respondent: \_\_\_\_\_

Complainant: \_\_\_\_\_

Victim: \_\_\_\_\_

Date of Communication: \_\_\_\_\_

Method: \_\_\_\_\_

Notes: \_\_\_\_\_

**17. Right to Appeal:**

- A party who is dissatisfied with the outcome of the investigation may appeal the decision.
- A student must be informed of his or her right to file a complaint with the United States Department of Education Office for Civil Rights for complaints regarding harassment.

\_\_\_\_\_ REQUIRED: The person completing this form will notify and document that he/she informed the parent/guardian of his/her right to appeal under policy FFH/FNG(LOCAL), or applicable Title IX complaint procedures

**18. Filing of Report:**

This report is being filed with:

\_\_\_\_\_ Campus Administrator(s) \_\_\_\_\_

\_\_\_\_\_ Superintendent

\_\_\_\_\_ Coordinator

\_\_\_\_\_ Section 504

\_\_\_\_\_ Title IX

\_\_\_\_\_ Title IV

\_\_\_\_\_ Other \_\_\_\_\_

Note: This report and any documentation related hereto must be maintained for seven years in accordance to Board Policy FFH.

19. Supportive Action(s) or Other Actions Taken: Use additional pages if needed.

**Signature of Person Completing Report:** \_\_\_\_\_

**Printed Name and Title:** \_\_\_\_\_

**Date Report Completed:** \_\_\_\_\_