

**Sexual Harassment Investigation Form**  
**North Country Charter Academy**

School Information:

- Littleton School
- Lancaster School

This School Sexual Harassment Investigation Form is to be used to document the investigation and comply with the reporting requirements for all alleged incidents of school sexual harassment consistent with School Board Policy # ACAC.

**REPORTING:**

Complete one School Sexual Harassment Investigation Form for each alleged victim.

School Administrator completing form:

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Date and Time reported to Principal/Designee:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Required investigation completion date(reported date + 20 calendar days): \_\_\_\_\_

Person reporting incident: \_\_\_\_\_

Name of Alleged Victim	Age	School	Notes
Name(s) of Alleged Perpetrator(s)	Age	School	Notes

Date(s) of Incident: \_\_\_\_\_

Location of Incident: (check all that apply):

- On school property: \_\_\_\_\_
- At school sponsored event or activity: \_\_\_\_\_
- On school bus: \_\_\_\_\_
- Off campus: \_\_\_\_\_

Description of alleged sexual harassment:

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**REPORTING:**

Police Reporting under Safe Schools:

- Discretionary
- Mandatory

Date: \_\_\_\_\_

Reported to Title IX Coordinator: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Title IX Coordinator's Meeting with Complainant: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Notice of rights regarding filing of formal complaint to Complainant:  
Date: \_\_\_\_\_ Time: \_\_\_\_\_

Manner: \_\_\_\_\_

Notice of rights regarding filing of formal complaint to Respondent:  
Date: \_\_\_\_\_ Time: \_\_\_\_\_

Manner: \_\_\_\_\_

**FORMAL COMPLAINT:**

Formal Complaint Filed by Alleged Victim (circle one): Yes No

If Yes: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Formal Complaint Filed By Title IX Coordinator (circle one): Yes No

If yes, list date and reasons:

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***IF FORMAL COMPLAINT IS FILED, PROCEED WITH TITLE IX INVESTIGATION.***

***IF NO FORMAL COMPLAINT IS FILED, DETERMINE WHETHER OTHER POLICIES AND RULES APPLY AND PROCEED UNDER THOSE RULES AND POLICIES.***

**FORMAL COMPLAINT DISMISSED:**

Formal Complaint dismissed?

- Yes
- No

If yes, mandatory dismissal because:

- does not constitute sexual harassment even if proved;
- did not occur in the District’s program or activity; or
- did not occur against a person in the United States

OR

If yes, permissive dismissal because:

- complainant in writing notified Title IX Coordinator that Complainant wanted to withdraw formal complaint or allegations;
- respondent is no longer enrolled or employed by District; or
- specific circumstances prevent the District from gathering evidence sufficient to make a determination.

Describe the specific circumstances:

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**SUPPORTIVE MEASURES:**

Were Supportive Measures offered to Complainant?	Yes	No
If yes, detail the Supportive Measures:		

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Supportive Measures Accepted by Complainant:	Yes	No
If yes, list the Supportive Measures:		

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Were Supportive Measures offered to Respondent?	Yes	No
If yes, detail the Supportive Measures:		

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Supportive Measures Accepted by Respondent:	Yes	No
If yes, list the Supportive Measures:		

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**TITLE IX INVESTIGATION:**

Investigator assigned: \_\_\_\_\_

Date: \_\_\_\_\_

Date Investigation began: \_\_\_\_\_

Initials: \_\_\_\_\_

What actions were taken to investigate this incident?  
(check all that apply)

- Interviewed alleged student victim
- Interviewed alleged student victim's parent/guardian
- Interviewed alleged perpetrator(s)
- Interviewed alleged student perpetrator's parent/guardian
- Examined physical evidence:
- Interviewed witnesses
- Witness statements collected in writing
- interviewed school nurse
- interviewed guidance/school psychologist
- Reviewed Academic Records
- Reviewed Student Records
- Reviewed Student Attendance
- Reviewed Video Surveillance
- Reviewed medical information
- Reviewed bus incident report
- Reviewed social history between parties
- Reviewed electronic content/web content
- Reviewed changes in emotional functioning
- Determined if retaliation or reprisal did occur
- Is victim concerned about retaliation or reprisal occurring against a student, teacher, administrator, volunteer, or other employee
- Considered history of prior student conflicts and/or problematic behavior
- Interviewed teachers and/or school staff: (list names)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OTHER:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Before completing investigation report, Title IX Coordinator sends parties and representatives the evidence and gives them 10 days to respond in writing.

Evidence sent:            Date: \_\_\_\_\_ Manner: \_\_\_\_\_

To Whom: \_\_\_\_\_

10 day written response from parties due: \_\_\_\_\_

Investigator prepares written investigative report in accordance with Policy ACAC Section III E(3).

Investigative report sent to Title IX Coordinator, parties, and representatives and investigator gives parties 10 days to provide Title IX Coordinator with written response to investigative report.

Date: \_\_\_\_\_ Manner: \_\_\_\_\_

To Whom: \_\_\_\_\_

10 days written response from parties due: \_\_\_\_\_

**DETERMINING RESPONSIBILITY/EVIDENCE OF SEXUAL HARASSMENT:**

Initial Decision-Maker Assigned: \_\_\_\_\_

Date: \_\_\_\_\_

Definition of Sexual Harassment:	Look for:
<input type="checkbox"/> Conduct is on the basis of sex	<input type="checkbox"/> Gender <input type="checkbox"/> Sexual Orientation <input type="checkbox"/> Gender Identity
<input type="checkbox"/> Conduct occurred in a school program or activity	<input type="checkbox"/> On school property <input type="checkbox"/> District control of program or activity <input type="checkbox"/> District control over alleged perpetrator
<input type="checkbox"/> If above criteria are not met, conduct does not violate Title IX <input type="checkbox"/> If above two criteria are met, proceed to the following: (one of the following must be found for the conduct to violate Title IX):	
<input type="checkbox"/> Did a District employee condition an aid, benefit, or service of an education program or activity on the individual's participation or refusal to participate in sexual conduct regardless of whether the conduct is welcomed by the student or other employee	
<input type="checkbox"/> Unwelcome sex-based/related conduct determined by a reasonable person to be so severe, pervasive AND objectively offensive that it effectively denies a person equal access to the education program or activity	<input type="checkbox"/> Sexually suggestive remarks or jokes <input type="checkbox"/> Verbal harassment or abuse <input type="checkbox"/> Displaying or distributing sexually suggestive pictures, in whatever form (e.g., drawings, photographs, videos, irrespective of format) <input type="checkbox"/> Sexually suggestive gesturing, including touching oneself in a sexually suggestive manner in front of others <input type="checkbox"/> Harassing or sexually suggestive or offensive messages that are written or electronic <input type="checkbox"/> Subtle or direct propositions for sexual favors or activities <input type="checkbox"/> Touching of a sexual nature or groping

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	<input type="checkbox"/> Teasing or name-calling related to sexual <input type="checkbox"/> Excessive emotional behavior <input type="checkbox"/> Evidence of anxiety (including physical symptoms) or being nervous or scared <input type="checkbox"/> Evidence of internalizing behavior – increased isolation, socially removed <input type="checkbox"/> Changes in school attendance: absences, tardies, dismissals <input type="checkbox"/> Changes in grades – school performance <input type="checkbox"/> Changes in participation of school activities – athletics, co-curricular, etc. <input type="checkbox"/> Avoidance of elements of school days including school bus <input type="checkbox"/> Created significant tension between students/others <input type="checkbox"/> Students are significantly uncomfortable <input type="checkbox"/> Student hostile in educational environment <input type="checkbox"/> Socially maladjusted behavior directed to student(s) <input type="checkbox"/> Significant incident of disruption <input type="checkbox"/> Discipline patterns <input type="checkbox"/> Violations of behavioral expectations <input type="checkbox"/> Other: _____
<input type="checkbox"/> Sexual assault, domestic violence, dating violence or stalking	<input type="checkbox"/> Sexual assault <input type="checkbox"/> Domestic violence <input type="checkbox"/> Dating violence <input type="checkbox"/> Stalking

Before determining responsibility, initial decision-maker provides each party 10 days to submit written, relevant questions for initial decision-maker to ask any party or witnesses.

Questions Due: \_\_\_\_\_

Questions received:    Yes                      No

If yes, 10 days for response from initial decision-maker.

Questions Sent to Parties/Witnesses: \_\_\_\_\_

Manner: \_\_\_\_\_

Answers Due: \_\_\_\_\_

Supplementary limited follow-up questions in 5 days:            Yes                      No

If yes, 5 days for answers.

Answers Due: \_\_\_\_\_

**Initial decision-maker makes written determination within 10 days after close of questions in accordance with Policy ACAC Section III F(9).**

**RESPONSIBILITY DETERMINATION:**

Did initial decision-maker find sexual harassment?

- Yes Proceed to next section
- No Stop sexual harassment investigation and process under other rules and policies.

**INTERVENTIONS/CONSEQUENCES (CHECK ALL THAT APPLY):**

<b>Victim</b>	<b>Perpetrator</b>	<b>Intervention/Consequences</b>	<b>Notes</b>
		None were warranted	
		Student conference(s) with administrator	
		Positive behavioral interventions	
		Teacher notification plan	
		Other school staff notification	
		Parent meeting(s)	
		Referral to 504, Rtl, special education team	
		Counseling/therapeutic interventions	
		Silent mentor program	
		Safe person plan	
		Check-in/Check-out assigned	
		Sexual harassment prevention plan to be developed	
		Follow up/Monitoring	
		Unstructured areas safety plan	
		School bus planning/notification	
		Loss of privileges	
		Detention	

		In-school suspension	
		Out-of school suspension	
		Other(specify):	

**Additional Notes:**

**FOR STATE REPORTING PURPOSES:**

This section is designed to collect sexual harassment data consistent with the NH DOE reporting categories of the School Safety Survey. Please hypothesize the intent of this substantiate sexual harassment incident based on the following state reporting categories. Please note, only check if your investigation provides evidence upon which to base this conclusion. If the reporting categories do not apply, please do not check.

- On the basis of gender
- On the basis of sexual orientation
- on the basis of gender identity

Principal: \_\_\_\_\_

Signature

\_\_\_\_\_

Date

Designee: \_\_\_\_\_

Signature

\_\_\_\_\_

Date



**ATTACHMENTS:**

- Discipline Referral
- Safe Schools Report
- Parent/staff Sexual Harassment Reporting Form
- Formal Complaint0
- Investigative Report
- Initial Decision-Maker's Written Determination
- Responses and Questions of Complainant and Respondent

**Received at the SAU Office on:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**THIS SEXUAL HARASSMENT INVESTIGATION FORM AND THE  
ATTACHMENTS MUST BE MAINTAINED FOR A MINIMUM OF  
SEVEN (7) YEARS.**