TITLE IX SEXUAL HARASSMENT COMPLAINT FORM

PURPOSE: The purpose of this Title IX formal complaint form is to gather the essential basic facts of the alleged actions in order that, prompt and equitable resolutions of complaints of complaints of sexual harassment or sexual violence, in violation of Title IX of the Education Amendments of 1972 (“Title IX”) can be resolved as expediently and appropriately as possible. The filing of a formal complaint triggers the process outlined in Moore County Board of Education Policy 3070/4070/6070 Title IX Sexual Harassment – Prohibited Conduct and Reporting Process.

INSTRUCTIONS: Individuals alleging Title IX sexual harassment or sexual violence and requesting review should complete this form and submit it to the Title IX Coordinator as soon as possible after the occurrence of the alleged incident(s):

Title IX Coordinator:
- Anita W. Alpenfels, Ed.D., Executive Officer for Human Resources
- anita@ncmcs.org
- (910) 947-2976
- Moore County Schools
  P.O. Box 1180
  Carthage, NC 28327

1. Nature of Grievance: Please describe the action you believe may be sexual harassment or 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:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
2. When did the actions described above occur?

________________________________________________________________________
________________________________________________________________________

3. Are there any witnesses to this matter?
   □ Yes      □ No      If yes, please identify the witnesses:
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

4. Did you discuss this matter with any of the witnesses identified in Item 4?
   □ Yes      □ No      If yes, please identify:
   Person to whom you have spoken: __________________________________________
   Date: _______________ Method of Communication: __________________________
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   Date: _______________ Method of Communication: __________________________
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   Date: _______________ Method of Communication: __________________________
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   Date: _______________ Method of Communication: __________________________
   Person to whom you have spoken: __________________________________________
   Date: _______________ Method of Communication: __________________________
5. Have you spoken to any administrator(s) or other school employee(s) about this matter?

☐ Yes    ☐ No    If yes, please identify:

Person to whom you have spoken: ____________________________________________

Date: _____________   Method of Communication: ____________________________

6. Please describe the result of the discussion(s) identified in Question 5.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

7. PLEASE ATTACH ANY STATEMENTS, NAMES OF WITNESSES, REPORTS, OR OTHER DOCUMENTS WHICH YOU FEEL ARE RELEVANT TO YOUR COMPLAINT.

I certify that the foregoing information is true and correct.

Print Name: ______________________________________________________________

Signature: ________________________________________________________________

Date: ___________________________________________________________________

☐ I am the Complainant.

☐ I am the Complainant’s parent/guardian.