## Uniform Complaint Procedure Discrimination/Harassment Complaint Reporting Form

In accordance with the District's Uniform Complaint Procedures (5 CCR 4620) each school district shall follow uniform complaint procedures when addressing complaints alleging unlawful discrimination, harassment, intimidation and bullying against any protected group. Protected groups are enumerated by Education Code §§ 200 and 220, Additionally, it is the policy of the State of California, pursuant to Section 200, that all individuals shall enjoy freedom from discrimination and/or harassment of any kind in the educational institutions of the state. This also includes sexual harassment, which is a form of sexual discrimination (EC § 231.5).

| I. Contact Information:  |   |  |
|--|---|--|
| Name:Address:  |   |  |
| City: Zip:<br>Home Phone: Work or Cell Phone:  |   |  |
| Home Phone:  | Work or Cell Phone:   |  |
| II. Complainant  |   |  |
| You are filing this complaint on behalf of:  |   |  |
| $\square$ your child or a (student)  | □ another student □ a group   |  |
| III. School Information  |   |  |
| School Name:   |   |  |
| Principal's Name:Address:  |   |  |
|  |   |  |
| IV. Basis of Complaint:  |   |  |
| Please check the following box(s), based or intimidation and bullying you experienced, (                     | n the type(s) of discrimination, harassment, (Education Code §§ 200 and 220 |  |
| ☐ Sexual orientation   | ☐ Ancestry  |  |
| ☐ Gender *   | ☐ Mental or physical disability   |  |
| <ul><li>☐ Ethnicity</li><li>☐ Race</li></ul>   | <ul><li>☐ Age</li><li>☐ Association with any of these</li></ul>             |  |
| ☐ National origin  | categories  |  |
| ☐ Religion   | ☐ Sexual Harassment   |  |
| ☐ Color  | ☐ Sex (Title IX)  |  |
| V. Details of Complaint Please answer the following questions to the sheets of paper if you need more space. | e best of your ability. Attach additional                                   |  |
| Please <b>describe</b> the type of incident(s) you including the events or actions, in as much               |   |  |
|  |   |  |
|  |   |  |

| List the <b>individuals</b> involved in the incident(s) complaint of:                    |  |
|--|--|
|  |  |
| List any witnesses to the incident(s):   |  |
| Describe the <b>location where</b> the incident(s) oc                                    | curred:                                  |
|  |  |
|  |  |
| Please list <b>all the date(s) and times</b> when the acts first came to your attention: | incident(s) occurred or when the alleged |
|  |  |
| What steps, if any, have you taken to resolve the  | his issue before filing a complaint?     |
|  |  |
|  |  |
|  |  |
| Signature of person filing complaint   | Date                                     |
| Received by:<br>Title:   | Date Filed:                              |
|  |  |

Please provide a duplicate copy to the complainant.

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