

Board Policy

Code No. 600.2E1

EQUAL EDUCATIONAL OPPORTUNITY

Building Level Complaint Form

Check (x) area of complaint:

_____ Title I (Reading and/or Math)

_____ Title VI

_____ Section 504 Handicapped

_____ Title VII

_____ Americans with Disabilities Act

_____ Title IX Sex Discrimination

Name of Complainant _____

Address _____

Date of Illegal Violation _____

Site of Violation _____

Signature of Complainant _____

Nature of Complaint (Please write a brief statement of the complaint, which must be in the area checked above): _____

If the complaint is being filed by a representative of the complainant, please sign here:

(Signature of Complainant Representative)

Signature of Appropriate Officer _____

*Reapproved: June 21, 2004
July 9, 2007
July 11, 2011*

Revised: June 18, 2001