

# Bouse Elementary School District Title IX Complaint Form

Bouse Elementary School District #26 complies with the federal and state laws prohibiting unlawful discrimination based on race, color, national origin, sex, disability and age in its programs and activities. Any person that believes they have been harassed or discriminated against based on his/her sex can file this complaint form with the district's Title IX Coordinator listed on the back of this page.

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

Address: \_\_\_\_\_

Street or PO Box

City

State

Zip Code

Phone #: \_\_\_\_\_

Home

Cell

Work

## I wish to complain against:

Name of person, school (department), program or activity: \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

Specify your complaint by stating the problem as you see it. Describe the incident, the participants, the background to the incident, and any attempts you have made to solve the problem. Be sure to note relevant dates, times and places. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If there is anyone who could provide more information regarding this complaint, please list name(s), address(es), and telephone number(s).

Name Address Phone number

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The projected solution:**

Indicate what you think can or should be done to solve the problem. Be as specific as possible.

---

---

---

---

---

---

Do you want this complaint to be formally investigated and addressed by the school?

**Yes**  **No** **If No please clarify:**

I do not want a formal investigation. I am just bringing this to the school's attention.

I do not want a formal investigation. I would like to speak with the Title IX Coordinator about my complaint.

Other (Please explain): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

**Please mail or hand deliver this complaint form to the Title IX Coordinator listed below.**

**Brandy Peck  
Head Teacher and Title IX Coordinator  
P.O. Box "S" Bouse, Az. 85325  
44936 Joshua Dr. Bouse, Az. 85325  
(928)851-2213**

The Title IX Coordinator as designated in ACA-R, shall give one(1) copy to the complainant and Shall retain one (1) copy for the file.