

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

See the following pages for forms related to Title IX Sexual Harassment

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EXHIBIT B: Title IX Grievance-Process Log  
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EXHIBIT C: Title IX Record Keeping Cover Sheet  
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2 Pages

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2 Pages

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1 Page

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1 Page

**EXHIBIT A**

**Title IX Summary Report of Response to Alleged Sexual Harassment**

**Instructions to Title IX Coordinator/Designee (delete after reading):**

- **This form is to be completed by the Title IX Coordinator and used as a cover letter to the Grievance Process Log.**

District Case Number: \_\_\_\_\_

Complainant: \_\_\_\_\_

Respondent: \_\_\_\_\_

Under the Title IX Regulations applicable to sexual harassment, a recipient of federal funds must document the bases for its conclusion that its response was “not deliberately indifferent” and document that it has taken measures designed to restore or preserve equal access to the recipient’s education program or activity. 34 C.F.R. § 106.45(b)(10)(ii).

On \_\_\_\_\_, the District received a report of alleged sexual harassment concerning the above-referenced Complainant(s) and Respondent(s). The District subsequently followed all applicable policies and procedures to respond to the allegations. The District has taken measures designed to restore or preserve equal access to the District’s education program or activity and responded to the allegations in a manner that was “not deliberately indifferent” by taking the actions described in the attached Title IX Grievance-Process Log.

Signature \_\_\_\_\_

[Name]

Title IX Coordinator

[Address]

[Phone]

[Email]

\_\_\_\_\_ Date

Signature \_\_\_\_\_

[Name]

Title IX Designee

[Address]

[Phone]

[Email]

\_\_\_\_\_ Date

**EXHIBIT B**

**Title IX Grievance Process Log**

➤ **To be completed by the Title IX Coordinator/Designee as each step occurs.**

District Case Number \_\_\_\_\_

<b>1. Report of Sexual Harassment</b>	Date of Report: _____
<b>EXHIBIT D TITLE IX Reporting Form – to be used when an individual is reporting alleged sexual harassment.</b>	

<b>COMPLAINANT</b>	<input type="checkbox"/> Student	<input type="checkbox"/> Employee
Name		
DOB		
Position		
Campus/Department		
Phone		
Email		
Address		
Advisor, if any		
<b>RESPONDENT</b>	<input type="checkbox"/> Student	<input type="checkbox"/> Employee
Name		
DOB		
Position		
Campus/Department		
Phone		
Email		
Address		
Advisor, If any		
<b>Incident Date(s)</b>		
<b>Incident Location(s)</b>		
<b>Who made report?</b>		
<b>Report made to?</b>		

<b>2. Title IX Coordinator: Discussion with Complainant</b>	Date: _____
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➤ **A copy of the Title IX Formal Complaint Form, (EXHIBIT F), as well as information about the District's Title IX Grievance Process will be provided to the Complainant and the Respondent.**

<b>Identities of All Present at Meeting</b> (name/relationship to Complainant)	<b>The following items are to be discussed during the meeting between Title IX Coordinator/Designee and the Complainant.</b>
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<b>Discussion Checklist</b>	<input type="checkbox"/> Allegations	<input type="checkbox"/> Supportive Measures (see step 3 below)	<input type="checkbox"/> Formal Complaint Process
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<b>3. Title IX Supportive Measures Response</b> <b>(EXHIBIT E)</b> This form is to be used when a report has been made of alleged sexual harassment. A meeting or conference should take place between the alleged victim/parent and the Title IX Coordinator or Designee.	<input type="checkbox"/> Accepted	<input type="checkbox"/> Declined
<b>Describe supportive or protective measure(s) accepted</b>		
<b>Date implemented</b>		

<b>4. Formal Complaint (EXHIBIT F Title IX Formal Complaint)</b> <b>(EXHIBIT G-1-Student to Employee- Title IX Notice of Formal Complaint of Sexual Harassment)</b> <b>(EXHIBIT G-2 – Employee to Employee- Title IX Notice of Formal Complaint of Sexual Harassment)</b>		
<b>EXHIBIT F Title IX Formal Complaint -filed and signed (Select One)</b>	<input type="checkbox"/> Complainant  Date: _____	<input type="checkbox"/> Title IX Coordinator  Date: _____
<b>EXHIBIT G: Title IX Notice of Formal Complaint of Sexual Harassment</b> (This form should be sent simultaneously to Complainant and Respondent along with a copy of the Title IX Formal Complaint; DIA (LEGAL) and (LOCAL); FFH (LEGAL) and (LOCAL); DIA Administrative Regulations)	<input type="checkbox"/> Complainant  Date Sent: _____  Sent by: _____  Receipt Confirmed: _____	<input type="checkbox"/> Respondent  Date Sent: _____  Sent by: _____  Receipt Confirmed: _____

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**5. Consideration of Administrative Leave**

**Title IX Notice of Employee Administrative Leave (EXHIBIT H)**

(If consideration of an employee being placed on Administrative Leave, use EXHIBIT H as notice.)

<b>Date of Action</b>	
<b>Decided by</b>	
<b>Describe Action</b>	
<b>Administrative Leave checklist:</b> <ul style="list-style-type: none"><li><input type="checkbox"/> <b>Determination</b></li><li><input type="checkbox"/> <b>Notice of Employee Administrative Leave (EXHIBIT H)</b></li></ul>	

**6. Title IX Dismissal of Formal Complaint (EXHIBIT I)**

If the complaint will be dismissed, complete form EXHIBIT I.

<b>Reason for Dismissal (Check all that apply)</b>	<ul style="list-style-type: none"><li><input type="checkbox"/> The conduct does not constitute sexual harassment under Title IX.</li><li><input type="checkbox"/> The conduct did not occur in a district's program or activity.</li><li><input type="checkbox"/> The conduct did not occur in the United States.</li><li><input type="checkbox"/> The Complainant, in writing, withdrew the allegations and Formal Complaint.</li><li><input type="checkbox"/> The Respondent is no longer employed in the district.</li><li><input type="checkbox"/> Specific circumstances prevent the district from gathering evidence sufficient to make a determination.</li></ul>
<b>Date of Title IX Notice of Dismissal of Formal Complaint (EXHIBIT I)</b>	

**7. Voluntary Informal Resolution Process (EXHIBIT J Title IX Voluntary Informal Resolution Form)** (The voluntary informal resolution process can only be made with Employee to Employee, not Student to Employee.)

<b>Facilitator assigned</b>	
<b>Date assigned</b>	
<b>Notice sent after meeting</b>	
<b>Agreement date</b>	
<b>Withdrawal date</b>	

**8. Investigation (EXHIBIT K – Title IX Investigator's Checklist)** (Refer to Investigator's Checklist for all steps in investigation.)

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<b>(EXHIBIT P – Title IX Notice of Opportunity to Review Evidence of Formal Complaint)</b> <b>(EXHIBIT Q – Title IX Investigative Report)</b>	
Investigator assigned	
Position	
Date assigned	
<b>EXHIBIT P – Title IX Notice of Opportunity to Review Evidence of Formal Complaint</b> (This form is to be sent with Investigator notifies parties of the opportunity to review evidence.)	Date Sent: _____
<b>EXHIBIT Q – Title IX Investigative Report</b>	Date Sent: _____
<b>EXHIBIT R – Title IX Notice of Investigative Report and Assigned Decision Maker</b> (This notice is sent with the completed Investigative Report.)	Date Sent: _____

<b>9. Determination of Responsibility (EXHIBIT T – Title IX Determination of Responsibility Sexual Harassment Decision)</b>		
Decision Maker		
Position		
Date Assigned		
<b>(EXHIBIT T – Title IX Determination of Responsibility Sexual Harassment Decision)</b> (This notice is sent when the Decision maker has made their decision regarding the alleged sexual harassment charges.)	Complainant Date Sent: _____  Sent By: _____  Receipt Confirmed: _____	Respondent Date Sent: _____  Sent By: _____  Receipt Confirmed: _____

<b>10. Appeal (EXHIBIT U – Title IX Determination of Responsibility Appeal Form)</b> <b>(EXHIBIT W – Title IX Notice of Appeal of Determination of Responsibility) (EXHIBIT X Title IX Decision on Appeal of Determination of Responsibility)</b>	
<b>EXHIBIT U – Title IX Determination of Responsibility Appeal Form</b> (If one of the parties files an appeal, this is the form that	Date: _____

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should be received from the filing party.)	
<b>EXHIBIT W Title IX Notice of Appeal of Determination of Responsibility</b> (This notice should be sent with the Title IX Determination of Responsibility Appeal form, when an appeal has been filed.)	Date Sent: _____
<b>Appellate Decision Maker assigned</b>	
<b>Position</b>	
<b>Date assigned</b>	
<b>EXHIBIT X Title IX Decision on Appeal of Determination of Responsibility</b> (This form should be used when the final appeal decision has been made.)	Date Sent: _____

11. <u>Concluding Actions by Title IX Coordinator:</u>	
<b>Compile and secure all records related to complaint</b>	Date:
<b>Complete (EXHIBIT C Title IX Record Keeping Cover Sheet)</b>	Date:
<b>Complete Response Summary (EXHIBIT A Title IX Summary Report of Response to Alleged Sexual Harassment)</b>	Date:

\_\_\_\_\_  
Signature  
[Name]  
Title IX Coordinator/Designee  
[Address]  
[Phone]  
[Email]

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature  
[Name]  
Title IX Coordinator/Designee  
[Address]  
[Phone]  
[Email]

\_\_\_\_\_  
Date



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**EXHIBIT C**

<b>Title IX Record Keeping Cover Sheet</b>
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- All records related to a report of sexual harassment must be kept for a period of seven (7) years.

District Case Number: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Date of Formal Complaint (if applicable): \_\_\_\_\_

Date of Final Decision (if applicable): \_\_\_\_\_

- Title IX Grievance Process Log (EXHIBIT B)
- Title IX Record Keeping Cover Sheet (this document EXHIBIT C)
- Title IX Reporting Form (EXHIBIT D)
- Title IX Supportive Measures Response (EXHIBIT E)
  - Complainant
  - Respondent (if applicable)
- Title IX Formal Complaint Form (EXHIBIT F)
- Title IX Voluntary Informal Resolution Form (if applicable EXHIBIT J) (may only be used for an employee alleging sexual harassment against another employee)
- Title IX Notice of Formal Complaint of Sexual Harassment (EXHIBIT G)
- Title IX Notice of Employee Administrative Leave – (if applicable EXHIBIT H)
- Title IX Notice of Dismissal of Formal Complaint (EXHIBIT I)
- Investigation file
  - Title IX Investigation Report -Investigator's Checklist (EXHIBIT K)
  - Title IX Notice of Investigative Interviews (EXHIBIT L)
  - Title IX Witness Statements (EXHIBIT N)
  - Title IX Employee Witness Interview Forms (EXHIBIT O)
  - Copies of all evidence obtained
  - Notes or transcripts from interviews
  - Title X Notice of Opportunity to Review Evidence of Formal Complaint (EXHIBIT P)
  - Any written statements provided by parties concerning allegations or investigative report

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- ☐ Title IX Investigative Report (EXHIBIT Q)
- ☐ Title IX Notice of Investigative Report and Assigned Decision Maker (EXHIBIT R)
- Decision file from decision maker
  - ☐ Documentation related to any evidence or witnesses presented by parties
  - ☐ Written questions submitted by parties and answers submitted by parties/witnesses
  - ☐ Title IX Notice of Exclusion of Questions Submitted – (if applicable EXHIBIT S)
  - ☐ Any written statements by decision maker declining to submit proposed question(s) to other party due to lack of relevance to allegations
  - ☐ Title IX Determination of Responsibility – Sexual Harassment Decision (EXHIBIT T)
- Appeals Documentation (if applicable)
  - ☐ Title IX Determination of Responsibility Appeal Form (EXHIBIT U)
  - ☐ Title IX Dismissal of Formal Complaint Appeal Form (EXHIBIT V)
  - ☐ All other notices and other correspondence exchanged with parties
  - ☐ Written statements submitted by each party challenging or supporting Determination of Responsibility
  - ☐ Title IX Notice of Appeal of Determination of Responsibility (EXHIBIT W)
  - ☐ Title IX Decision on Appeal of Determination of Responsibility (EXHIBIT X)
- Documentation from Title IX Coordinator concerning implementation of disciplinary actions and remedies set forth in Determination of Responsibility
- Dismissal documentation (if applicable)
- Title IX Summary Report of Response to Alleged Sexual Harassment (EXHIBIT A) (to be completed at conclusion of grievance process and used as cover letter attached to completed Grievance Process Log)

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Signature

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

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Date

The Title IX Coordinator must also retain copies of materials used to train the Title IX Coordinator, investigators, decision makers, and facilitators for seven (7) years.

**EXHIBIT D**

<b>Title IX Reporting Form</b>
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Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance. Reports of sexual harassment can be made at any time, including during non-business hours, via the following:

Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator  
mail: 1600 Mustang Rock Road, Fort Worth, TX 76179;  
phone: 817-232-0880  
email: [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net), or  
**Let's Talk!** (www.emsisd.com >Community>Let's Talk!)

***This form is not required to be completed by an individual reporting sexual harassment.***

**REPORTER INFORMATION:**

Reporter Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Campus/Department: \_\_\_\_\_ Position: \_\_\_\_\_

**Type of Prohibited Conduct:**

☐ Sexual Harassment      ☐ Sexual Assault      ☐ Dating Violence

☐ Stalking      ☐ Retaliation      ☐ Other \_\_\_\_\_

**Date Incident Occurred:** \_\_\_\_\_

Have there been continuing actions? \_\_\_\_\_ If so, when? \_\_\_\_\_

**Alleged Victim's Information:**

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

Campus/Department: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_

**Alleged Respondent's Information ( individual alleged to have engaged in sexual harassment/prohibited conduct):**

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

Campus/Department: \_\_\_\_\_ Position: \_\_\_\_\_

Email: \_\_\_\_\_

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**Describe the prohibited conduct:**

[illegible]

Please attach additional sheets, if necessary.

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**Were there any witnesses to this matter? (Please circle) Yes No**

If yes, please list those who witnessed the incident(s) or have knowledge of the incident. Please attach additional names if needed.

Name: \_\_\_\_\_ Campus/Department: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Campus/Department: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Campus/Department: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Did the reporter discuss the incident with any witnesses previously identified?**

**(Please circle) Yes No**

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

Method of Communication: \_\_\_\_\_

**Please identify any Administrators, District Employees, or Law Enforcement Agency to whom a report has been made:**

Reported to (Name): \_\_\_\_\_ Date: \_\_\_\_\_

Describe how concerns were reported: \_\_\_\_\_

Reported to (Name): \_\_\_\_\_ Date: \_\_\_\_\_

Describe how concerns were reported: \_\_\_\_\_

Report taken by: (Please Print Name) \_\_\_\_\_ Date: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

[Name]

[Address]

[Phone]

[Email]

**Immediately forward this document to the Title IX Coordinator at**  
**[T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).**

**EXHIBIT E -1**  
**Student to Employee**

<b>Title IX Supportive Measures Response - Complainant</b>
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- This letter may be sent to adult students or parents of minor students after contact by District officials about a report of alleged sexual harassment.

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

District Case Number: \_\_\_\_\_

Complainant: \_\_\_\_\_

Email: \_\_\_\_\_

Complainant Parent/Guardian: \_\_\_\_\_

Complainant Advisor (if any): \_\_\_\_\_

Dear \_\_\_\_\_,

On \_\_\_\_\_, the District received a report of alleged sexual harassment concerning the above-referenced Complainant(s). The following individuals \_\_\_\_\_

\_\_\_\_\_ met to discuss the allegations and the availability of supportive measures.

This letter is to confirm receipt of a report of alleged sexual harassment. It is our understanding that, at this time, a Formal Complaint has not been filed. In order to pursue this matter further a Formal Complaint must be filed; therefore, please contact my office immediately at 817-232-0880 extension 2450, or **T9Coordinator@ems-isd.net**.

Even though you have not filed a Formal Complaint, the District is implementing the following supportive measures, because school board policy DIA(LEGAL) and (LOCAL) and FFH (LEGAL) and (LOCAL) prohibit discrimination on the basis of sex, including sexual harassment and other prohibited conduct, against students and employees in all of its educational programs. In accordance with Title IX and District Policy, supportive measures are available to a complainant or respondent as a means to help restore and preserve equal access to the District's education program or activity. Supportive measures are non-disciplinary, non-punitive individualized services offered as appropriate to a complainant or respondent, as reasonably available, without fee or charge when a report of alleged sexual harassment is made. Supportive measures are available regardless of whether a formal complaint is filed.

During our meeting, we discussed the following options for supportive measures:

(These are examples)

1. Explaining to a complainant and/or respondent in detail Board policy FFH (LEGAL) and (LOCAL) and DIA (LEGAL) and (LOCAL) Freedom from discrimination, harassment, and retaliation policy and expectations of appropriate conduct.

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2. Counseling of students regarding appropriate behavior expectations and educational conversations.
3. Review of district and code of conduct expectations with student by administrator.
4. Change of class schedule, lunch schedule, locker location.
5. Extending of assignment deadlines or other course-related adjustments, including retaking an exam or completing makeup work.
6. Campus/class escort.
7. Increased school monitoring of [location] for [time period e.g., next 9 weeks].
8. Stay away agreement/No contact directives
9. Other: \_\_\_\_\_
10. Other: \_\_\_\_\_

<b>Supportive Measures:</b> list by number; individual responsible for implementation; and date of implementation	<b>Discussed and Accepted by Complainant</b>	<b>Discussed and Declined by Complainant</b>

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If you have questions about the District's Title IX grievance process or supportive measures, please contact the Title IX Coordinator's Office at **(817) 232-0880 extension 2450**, or [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).

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Complainant Signature

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Date

---

Signature

---

Date

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

Enclosure: DIA(LEGAL) and (LOCAL)  
FFH (LEGAL) and (LOCAL)  
DIA (ADMINISTRATIVE REGULATION)



**EXHIBIT E -2**  
**Employee to Employee**

<b>Title IX Supportive Measures Response - Complainant</b>
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- **This letter may be sent to an employee after contact by District officials about a report of alleged sexual harassment.**

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

District Case Number: \_\_\_\_\_

Complainant: \_\_\_\_\_

Email: \_\_\_\_\_

Complainant Advisor (if any): \_\_\_\_\_

Dear \_\_\_\_\_,

On \_\_\_\_\_, the District received a report of alleged sexual harassment concerning the above-referenced Complainant(s). The following individuals \_\_\_\_\_

\_\_\_\_\_ met to discuss the allegations and the availability of supportive measures.

This letter is to confirm receipt of a report of alleged sexual harassment. It is our understanding that, at this time, a Formal Complaint has not been filed. In order to pursue this matter further a Formal Complaint must be filed; therefore, please contact my office immediately at 817-232-0880 extension 2450, or **T9Coordinator@ems-isd.net**.

Even though you have not filed a Formal Complaint, the District is implementing the following supportive measures, because school board policy DIA(LEGAL) and (LOCAL) and FFH (LEGAL) and (LOCAL) prohibit discrimination on the basis of sex, including sexual harassment and other prohibited conduct, against students and employees in all of its educational programs. In accordance with Title IX and District Policy, supportive measures are available to a complainant or respondent as a means to help restore and preserve equal access to the District's education program or activity. Supportive measures are non-disciplinary, non-punitive individualized services offered as appropriate to a complainant or respondent, as reasonably available, without fee or charge when a report of alleged sexual harassment is made. Supportive measures are available regardless of whether a formal complaint is filed.

During our meeting, we discussed the following options for supportive measures:

**(These are examples)**

1. Explaining to a complainant and/or respondent in detail the district's non-discrimination harassment policy and expectations of appropriate conduct.
2. Implementing mutual or unilateral restrictions on contact between parties.

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3. Identifying specific campus/departments employees to serve as regular points of contact for each party.
4. Modifying work schedules.
5. Escorting parties when on campus.
6. Increased monitoring of [location] for [time period e.g., next 9 weeks].
7. Employee Assistance Program
8. Stay away agreement/No contact directives
9. Other: \_\_\_\_\_
10. Other: \_\_\_\_\_

<b>Supportive Measures:</b> list by number; individual responsible for implementation; and date of implementation	<b>Discussed and Accepted by Complainant</b>	<b>Discussed and Declined by Complainant</b>

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If you have questions about the District's Title IX grievance process or supportive measures, please contact the Title IX Coordinator's Office at **(817) 232-0880 extension 2450**, or [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).

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Complainant Signature

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Date

---

Signature

---

Date

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

Enclosure: DIA(LEGAL) and (LOCAL)  
FFH (LEGAL) and (LOCAL)  
DIA (ADMINISTRATIVE REGULATION)

**EXHIBIT F**

<b>Title IX Formal Complaint Form</b>
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Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance.

If you believe you have been the victim of sexual harassment, **you are not required to complete this form in its entirety; however, provide as much information as possible**, sign where indicated below, and submit it by hand delivery, electronic mail, or U.S. mail using the contact information for the Title IX Coordinator for Students and Employees:

**Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator,  
1600 Mustang Rock Road, Fort Worth, Texas 76179;  
817-232-0880 extension 2450;  
[T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).**

**Filing this Formal Complaint will launch an investigation and initiate the District's Title IX Grievance Process.**

This formal complaint form is intended for use by the alleged victim of Title IX sexual harassment (referred to in Title IX Regulations as the "**complainant**").

**Under federal law, only an alleged victim/complainant of sexual harassment who is currently participating or attempting to participate in the District's education program or activity, including a student or parent of a student, an employee, or applicant for employment, or the Title IX Coordinator, has the right to use the formal complaint process to initiate an investigation.**

A copy of this completed form, as well as information about the District's Title IX Grievance Process will be provided to the Complainant and the Respondent.

- **Complainant:** A student or employee who is alleged to be the victim of sexual harassment.
- **Respondent:** An employee who is alleged to be the perpetrator of sexual harassment.
- **Formal Complaint:** A document filed by a Complainant or signed by the Title IX Coordinator alleging sexual harassment against a Respondent and requesting that the District investigate the allegation.

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**COMPLAINANT INFORMATION (Please Print):**

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

Campus/Department/Position: \_\_\_\_\_

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**Type of Complaint:**

Discrimination based on: (Check all that apply)

- ☐ Sexual Harassment      ☐ Sexual Assault  
☐ Dating Violence    ☐ Stalking    ☐ Retaliation    ☐ Other

**Date and Location Incident Occurred:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has there been continuing action? \_\_\_\_\_ If so, when. \_\_\_\_\_

\_\_\_\_\_

**RESPONDENT INFORMATION:** Please list the individual(s) alleged to have engaged in sexual harassment/prohibited conduct:

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

Campus/Department/Position: \_\_\_\_\_

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

Campus/Department/Position: \_\_\_\_\_

**Nature of Complaint:** If you have already provided this information, you are not required to complete this page. If you have not provided this information, specifically describe your complaint against the named person(s) in the previous section, including how the person(s) sexually harassed you, assaulted you, or retaliated against you. Please describe the behavior, comments, or incidents that caused you to file your complaint. (Identify: Who, What, When, and Where)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

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(Please attach Title IX Reporting Form and additional pages as needed)

**Were there any witnesses to this matter?** (Select) ☐ Yes or ☐ No

If yes, please identify the witnesses to the incident(s) or those who have knowledge of the incident(s). Please attach additional names, if needed.

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Did you discuss this matter with any of the witnesses identified above?**

(Select) ☐ Yes or ☐ No

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

Method of Communication: \_\_\_\_\_

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

Method of Communication: \_\_\_\_\_

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**Please identify any Administrators, District Employees, or Law Enforcement Agency to whom who have reported your concerns:**

Reported to (Name) \_\_\_\_\_ Date: \_\_\_\_\_

Reported to (Name) \_\_\_\_\_ Date: \_\_\_\_\_

**Please list below and attach any evidence that you believe is relevant to your allegations.**

This could include audio or visual media, physical objects, online materials, text messages, voicemail messages, screen captures, emails, or any other item you intend to make available for the purpose of this complaint.

If known, please identify any information in the District's possession that you believe to be relevant to your allegations and would like the District to review (such as emails or security camera footage).

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**Informal Resolution Process:** Are you interested in the District's voluntary informal resolution process? (Select) ☐ **Yes** or ☐ **No** (Only available for employee alleging sexual harassment of another employee)

**Notice to Complainant: This document is a legal record of the allegations of sexual harassment that you have reported to the District in order to request a formal investigation.** Please keep a copy of this completed form and any supporting documentation for your records. Please review your rights and responsibilities at DIA(LEGAL) and (LOCAL), FFH(LEGAL) and (LOCAL) and DIA(REGULATION), which are attached to this form and also available online at: <https://pol.tasb.org/Policy/Code/1112?filter=DIA>

Any questions or concerns that you may have during this process may be directed to the District's Title IX Coordinator:

**Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator,**  
**1600 Mustang Rock Road, Fort Worth, Texas 76179;**  
**817-232-0880 extension 2450;**  
**[T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net)**

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

If, after reviewing your complaint form, the Title IX Coordinator finds that the allegations are not appropriate for a Title IX sexual harassment complaint process, but should be investigated by the District under a different policy or procedure, your formal complaint form will be forwarded to the appropriate District personnel in accordance with District policies. [see DIA, FFI, FFH] You have the right to appeal the dismissal of your formal complaint, as explained in the enclosed Policy documents.

**Please provide your signature below:**

**Complainant name:** \_\_\_\_\_

**Signature of Complainant:** \_\_\_\_\_

**Date of filing:** \_\_\_\_\_

**If this formal complaint is being signed by the District's Title IX Coordinator instead of a complainant:**

**Title IX Coordinator Name:** \_\_\_\_\_

**Title IX Coordinator Signature:** \_\_\_\_\_

**Date of filing:** \_\_\_\_\_

**District Case Number:** \_\_\_\_\_



**EXHIBIT G- 1 Student to Employee**

<b>Title IX Notice of Formal Complaint of Sexual Harassment</b>
---

**Instructions for the Title IX Coordinator/Designee (delete after reading):**

- This notice must be sent simultaneously to the Complainant and Respondent before the investigation of the Formal Complaint begins.
- If the individual is a student, address this to the student's parent/guardian in addition to the student.
- Print notice on district letterhead.

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

**District Case Number:** \_\_\_\_\_

**Complainant:** \_\_\_\_\_

**Respondent:** \_\_\_\_\_

**Re: Notice to Parties of Title IX Formal Complaint of Sexual Harassment**

Dear [Complainant/Respondent/Student's Parent/Guardian]:

This letter is to notify you of the filing of a Formal Complaint of sexual harassment involving conduct that may violate Title IX and/or District Policy and Codes of Conduct. The details of the allegations are included on the enclosed Formal Complaint form. Sexual harassment is prohibited by and defined in Board Policy DIA(LEGAL) and (LOCAL) and FFH (LEGAL) and (LOCAL). The grievance process for handling this complaint can be found in DIA (ADMINISTRATIVE REGULATION). The policies and procedures are enclosed for your reference.

The filing of a formal complaint initiates the District's Title IX Grievance Process, a copy of which is enclosed with this notice.

As explained in the enclosed Title IX Grievance Process, the District is obligated to investigate the allegations in a formal complaint of sexual harassment. I have appointed \_\_\_\_\_ [name], \_\_\_\_\_ [title] to serve as Investigator, and [he/she] will be in contact with you to arrange an interview to discuss the allegations.

**Please be aware that, by law, the Respondent is presumed not responsible for the alleged conduct and a determination regarding responsibility is made only at the conclusion of the grievance process by a decision-maker other than the investigator.**

I have appointed \_\_\_\_\_ [name], \_\_\_\_\_ [title] as the Decision Maker in this complaint.

You are allowed an advisor of your choice to assist you in this process. This may be any adult whom you wish to help you through the process. This advisor may be an attorney; but is not required to be an attorney. **Please note that the District does not provide or pay for a party's advisor.** If you would prefer, you may proceed without an advisor.

EMPLOYEE WELFARE

FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

You are also entitled to inspect and review all evidence obtained as part of the investigation that is directly related to the allegations raised in the Formal Complaint, including the evidence upon which the District does not intend to rely on in reaching a determination regarding responsibility so that you can meaningfully respond to the evidence prior to conclusion of the investigation.

Please be aware that District Policy and the Code of Conduct prohibits knowingly making false statements or knowingly submitting false information during the grievance process.

In addition, the EMS ISD Employee Handbook states that "All district employees should perform their duties in accordance with state and federal law, district policies and procedures and ethical standards. Violation of policies, regulations, or guidelines, including intentionally making a false claim, offering false statements, or refusing to cooperate with a district investigation may result in disciplinary action, including termination."

Additionally, be advised that the District prohibits a party from retaliating in any manner against an individual who has complained of alleged sexual harassment or against any individual who participates in an investigation of such conduct. Retaliation is punishable in accordance with District policy.

Should you have any questions after reviewing this information and the enclosed materials, please contact me.

Sincerely,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

Enclosures: DIA(LEGAL) and (LOCAL)  
FFH (LEGAL) and (LOCAL)  
DIA (ADMINISTRATIVE REGULATION)  
Formal Complaint

cc: Investigator

**EXHIBIT G- 2 Employee to Employee**

<b>Title IX Notice of Formal Complaint of Sexual Harassment</b>
---

**Instructions for the Title IX Coordinator/Designee (delete after reading):**

- This notice must be sent simultaneously to the Complainant and Respondent before the investigation of the Formal Complaint begins.
- Print notice on district letterhead.

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

**District Case Number:** \_\_\_\_\_

**Complainant:** \_\_\_\_\_

**Respondent:** \_\_\_\_\_

**Re: Notice to Parties of Title IX Formal Complaint of Sexual Harassment**

Dear \_\_\_\_\_:

This letter is to notify you of the filing of a Formal Complaint of sexual harassment involving conduct that may violate Title IX and/or District Policy and Codes of Conduct. The details of the allegations are included on the enclosed Formal Complaint form. Sexual harassment is prohibited by and defined in Board Policy DIA(LEGAL) and (LOCAL) and FFH (LEGAL) and (LOCAL). The grievance process for handling this complaint can be found in DIA (ADMINISTRATIVE REGULATION). The policies and procedures are enclosed for your reference.

The filing of a formal complaint initiates the District's Title IX Grievance Process, a copy of which is enclosed with this notice. The District's Title IX Grievance Process, regarding sexual harassment, includes an opportunity to participate in an informal resolution process that may be agreed upon by the parties as an alternative means of resolving the complaint in lieu of the formal grievance process at any time, prior to a determination regarding responsibility

As explained in the enclosed Title IX Grievance Process, the District is obligated to investigate the allegations in a formal complaint of sexual harassment. I have appointed \_\_\_\_\_ [name], \_\_\_\_\_ [title] to serve as Investigator, and [he/she] will be in contact with you to arrange an interview to discuss the allegations.

**Please be aware that, by law, the Respondent is presumed not responsible for the alleged conduct and a determination regarding responsibility is made only at the conclusion of the grievance process by a decision-maker other than the investigator.**

I have appointed \_\_\_\_\_ [name], \_\_\_\_\_ [title] as the Decision Maker in this complaint.

You are allowed an advisor of your choice to assist you in this process. This may be any adult whom you wish to help you through the process. This advisor may be an attorney; but is not required to be an attorney. **Please note that the District does not provide or pay for a party's advisor.** If you would prefer, you may proceed without an advisor.

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

You are also entitled to inspect and review all evidence obtained as part of the investigation that is directly related to the allegations raised in the Formal Complaint, including the evidence upon which the District does not intend to rely on in reaching a determination regarding responsibility so that you can meaningfully respond to the evidence prior to conclusion of the investigation.

Please be aware that District Policy prohibits knowingly making false statements or knowingly submitting false information during the grievance process.

In addition, the EMS ISD Employee Handbook states that "All district employees should perform their duties in accordance with state and federal law, district policies and procedures and ethical standards. Violation of policies, regulations, or guidelines, including intentionally making a false claim, offering false statements, or refusing to cooperate with a district investigation may result in disciplinary action, including termination."

Additionally, be advised that the District prohibits a party from retaliating in any manner against an individual who has complained of alleged sexual harassment or against any individual who participates in an investigation of such conduct. Retaliation is punishable in accordance with District policy.

Should you have any questions after reviewing this information and the enclosed materials, please contact me.

Sincerely,

---

Signature

---

Date

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

Enclosures: DIA(LEGAL) and (LOCAL)  
FFH (LEGAL) and (LOCAL)  
DIA (ADMINISTRATIVE REGULATION)  
Formal Complaint

cc: Investigator

**EXHIBIT H**

<b>Title IX Notice of Employee Administrative Leave</b>
---

- **This form should be printed on District letterhead. Delete these instructions before printing.**

**[Date]**

**[Name of Employee]**

**[Address]**

Re: Notice of Administrative Leave

Dear. Mr./Mrs. \_\_\_\_\_.

Effective immediately, you are being placed on paid administrative leave, pending an investigation into allegations of potential violations of Title IX of the Education Amendments of 1972 and Board Policy pertaining to sexual harassment.

While on administrative leave, you may not come to the workplace, perform any work, or access work email or systems. During the period of this administrative leave, you are required to remain available during the hours 8 a.m. to 5 p.m. Monday through Friday so that you can meet with the Title IX Coordinator or with others involved in this investigation, if instructed to do so. Please know that you may be required to attend these meetings on short notice.

Failure to meet these requirements could result in disciplinary action, up to and including termination.

Sincerely,

\_\_\_\_\_  
Signature

**[Name]**

**Superintendent** (or other administrator authorized under Board policy to place individuals on administrative leave. See DFAA and DFBA (LOCAL). Delete this before printing)

**[Address]**

**[Phone]**

**[Email]**

**EXHIBIT I**

**TITLE IX Notice of Dismissal of Formal Complaint**

**Instructions for Title IX Coordinator/Designee (delete after reading):**

- This notice must be sent simultaneously to the Complainant and Respondent.
- If the individual is a student, address this to the student's parent/guardian in addition to the student.
- Print this notice on district letterhead.
- Once signed, a copy of this dismissal form will be placed in the file for this complaint.

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

**District Case Number:** \_\_\_\_\_

**Complainant:** \_\_\_\_\_

**Respondent:** \_\_\_\_\_

**Re:** Notice of Title IX Dismissal of Formal Complaint of Sexual Harassment

Dear \_\_\_\_\_:

This letter is to notify you that the Formal Complaint of Sexual Harassment that was filed on [date] is being dismissed. The basis and reason for dismissal is listed below.

**Dismissal Basis:** [Check all that apply]

- ☐ The conduct does not constitute sexual harassment under Title IX.
- ☐ The conduct did not occur in a district's program or activity.
- ☐ The conduct did not occur in the United States.
- ☐ The Complainant, in writing, withdrew the allegations and Formal Complaint.
- ☐ The Respondent is no longer employed in the district.
- ☐ Specific circumstances prevent the district from gathering evidence sufficient to make a determination.

**Reason for Dismissal:** Describe the reasoning behind the dismissal of this complaint.

\_\_\_\_\_  
\_\_\_\_\_

[If the complaint will continue to be handled under other District policy, inform the parties of that. (Ex. If the conduct is sexual harassment, just not Title IX sexual harassment.)]

You have the right to appeal the dismissal of your formal complaint, as explained in Policy DIA (LOCAL) and DGBA (LOCAL) beginning at Level Two. You also have the right to file a complaint with the United States Department of Education Office of Civil Rights.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

Enclosures: DIA (LEGAL)(LOCAL), DGBA(LOCAL), Level Two Employee Complaint

**EXHIBIT J**

**Title IX Voluntary Informal Resolution Form**

**Instructions for Title IX Informal Resolution Facilitator (delete after reading):**

**[This form can only be used for Employee to Employee, not Student to Employee].**

- All documents, recordings and notes from the Informal Resolution Process must be provided to the Title IX Coordinator/Designee for recording keeping.

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance. EMS ISD does not require as a condition of employment or continuing employment, waiver the right to an investigation and adjudication of formal complaints of sexual harassment consistent with § 106.45.

When a **Formal Complaint** of sexual harassment has been filed, the District may facilitate an informal resolution process. This process is **voluntary**, and any party may decline to participate and may withdraw at any time during the process. The remedies or disciplinary actions of the informal resolution process must be designed to restore and preserve equal access to the District's educational programs or activities. The parties are not obligated to accept the remedies offered during this process.

If the parties agree to participate in the informal resolution process, the investigation may be abated for approximately two weeks to allow the parties to concentrate their efforts on resolution. If either party withdraws from the process, the Grievance Process will resume. This form is to be used to document the results of any voluntary informal resolution process. **Remedies or disciplinary actions resulting from participating in the informal resolution process, including both parties' records of the informal resolution process will be maintained and could be shared. A copy of any agreement must be provided to the parties and the Title IX Coordinator.**

---

**CASE INFORMATION (Please Print):**

District Case Number: \_\_\_\_\_

Complainant Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Numbers:(Cell) \_\_\_\_\_

Campus/Department/Position: \_\_\_\_\_

Respondent Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Numbers:(Cell) \_\_\_\_\_

Campus/Department/Position: \_\_\_\_\_

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**Describe allegations presented in the formal complaint.** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Written consent to participate in the Informal Resolution Process:**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Respondent Signature

\_\_\_\_\_  
Date

**Written consent of withdrawal from the Informal Resolution Process:**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Respondent Signature

\_\_\_\_\_  
Date

**Written confirmation of completion of the Informal Resolution Process:**

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Respondent Signature

\_\_\_\_\_  
Date

**Attach a copy of Resolution Agreement containing signatures of all parties.** It is not the responsibility of the Facilitator of this agreement to determine responsibility or decide disciplinary actions or remedies, but to help the parties work toward an agreement that may include disciplinary actions or remedies based on the parties' mutual agreement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Name]

Title IX Facilitator

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee



EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT OR RETALIATION

DIA  
(EXHIBIT)

**EXHIBIT K**

<b>Title IX Investigator's Checklist</b>
--

District Case No. \_\_\_\_\_

Name of Title IX Investigator Completing Report: \_\_\_\_\_

Date Investigative Report Completed:  
\_\_\_\_\_

Complainant's Name: \_\_\_\_\_

Respondent's Name: \_\_\_\_\_

Investigator Responsibility during investigation:

- ☐ Plan for meeting with Complainant and Respondent.
- ☐ Send Title IX Notice of Investigation Interview (EXHIBIT L) to Complaint and Respondent to set up times for the interviews.
- ☐ Use Title IX Basic Questions (EXHIBIT M) for Complainant Interview to plan questions to be asked.
- ☐ Use the Title IX Witness Statements (EXHIBIT N) to have the Witness give their statement in writing.
- ☐ For any student interviews, use the Title IX Student Interview Form (EXHIBIT O-2) to record the information they provide in the interview.
- ☐ For any interviews of employees, use the Title IX Employee Interview Form (EXHIBIT O-2) to record the information they provided in the interview.
- ☐ Do secondary interviews, as needed
- ☐ Gather and document all evidence obtained.
- ☐ Send Title IX Notice of Opportunity to review Evidence of Formal Complaint (EXHIBIT P)
- ☐ Give the parties 10 district business days to respond to evidence presented.
- ☐ Review the parties' written responses to the evidence, if any.
- ☐ Write Title IX Investigative Report using (EXHIBIT Q.)
- ☐ Send the Title IX Notice of Investigative Report and Assigned Decision Maker (EXHIBIT R) with the Investigative Report.

Title IX Notice of Investigative Interview (EXHIBIT L)			
Date Sent	Complainant or Respondent	Name of Party's advisor the notice was sent too.	Method of Delivery

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT OR RETALIATION

DIA  
(EXHIBIT)

**INTERVIEWS**

Date	Individual Interviewed (Name)	Role (Complainant/Respondent/Witness)	Date of Secondary Interview (if applicable)

**EVIDENCE OBTAINED**

(Document all evidence obtained)

Date Obtained	Description (emails, texts, pictures, videos, other)	Source of Evidence (Name of Source providing evidence)	Relevant to Allegations (Yes or No)

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT OR RETALIATION

DIA  
(EXHIBIT)

Title IX Notice of Opportunity to Review Evidence of Formal Complaint (EXHIBIT P)			
Date Sent	Complainant or Respondent	Name of Party's advisor the notice sent too.	Method of Delivery

- I certify, that all parties involved in the above-referenced Formal Complaint have been given an equal opportunity to inspect and review any evidence obtained as part of the investigation that is directly related to the allegations in the Formal Complaint.
- Such evidence was sent to each party and the party's advisor, as documented above.
- I certify that all parties were given at least 10 District business days to submit a written response after the evidence was provided to them.
- Date Complainant and/or Respondent submitted a written response to the investigator:  

Complainant: (Select one) ☐ Yes ☐ No      Date Received: \_\_\_\_\_

Respondent: (Select one) ☐ Yes ☐ No      Date Received: \_\_\_\_\_
- I certify that I considered any responses timely submitted by the parties prior to completing this investigative report.
- I certify that the Notice of Investigative Report and Assigned Decision Maker and the Investigative Report were sent to the following persons:  
Select all that apply:
  - ☐ Title IX Coordinator
  - ☐ Complainant                      ☐ Complainant's Advisor, if any
  - ☐ Respondent                      ☐ Respondent's Advisor, if any
  - ☐ Other: \_\_\_\_\_

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT OR RETALIATION

DIA  
(EXHIBIT)

- List the date of delivery of the Notice of Investigative Report and Assigned Decision Maker and the Title IX Investigative Report and method of delivery.

(Select one) ☐ Hard copy ☐ Electronic format

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

The Title IX Investigative Report must be provided to the parties at least 10 District business days prior to the determination of responsibility.

Include this document, along with all investigation documents, to the Title IX Coordinator.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**EXHIBIT L**

**Title IX Notice of Investigative Interview**

**Instructions to Investigator (delete after reading):**

- The Complainant and Respondent are entitled to written notice of the date, time, location, participants, and purpose of investigative interviews with sufficient time to prepare (e.g., 2-5 days).
- If the individual being interviewed is a student, address this to the student's parent/guardian in addition to the student.
- If you know the individual has an advisor, provide a copy of this notice to the advisor as well.

Print this notice on district letterhead

[Date]

[Student or Employee Complainant/Respondent/Student's Parent/Guardian]

[Address]

**Re:** Notice of Title IX Investigative Interview  
District Case Number. \_\_\_\_\_

Dear Mr./Ms. \_\_\_\_\_

The District has received a Formal Complaint alleging sexual harassment involving you. I plan to interview you at [list time range example: Between 1:30-2:30] on [Date] regarding this pending complaint. The interview will occur at [specify location ex. Boswell HS conference room].

You and/or an advisor may accompany you to the interview to observe the process. However, you will be expected to respond to questions directly. While an advisor may attend the meeting, he/she may not question you, others, or the investigator.

You have the right to submit evidence for consideration. You may submit evidence to me via email, flash-drive, or hard-copy. For all evidence you submit, please retain the original and provide only a copy. Include your name and the date on all information submitted. Please keep in mind that all evidence may be shared with all parties prior to the issuance of my investigative report.

Before the issuance of my investigative report, you, and the other party(ies) will have the opportunity to receive a copy of the evidence and an opportunity to submit a written response.

If you have any questions regarding the interview, please contact me at (XXX) XXX-XXXX or [email].

Sincerely,

\_\_\_\_\_  
Signature

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee; Advisor/Attorney (if applicable)

\_\_\_\_\_  
Date

**EXHIBIT M**

<b>Title IX Basic Questions for Complainant/Respondent/Witness Interview</b>
--

(Offer water; give directions where restrooms are located)

My name is \_\_\_\_\_. I am the \_\_\_\_\_ here in Eagle Mountain-Saginaw ISD and I am the investigator of this complaint.

The purpose of our interview today is due to a formal complaint of sexual harassment that has been filed.

(Questions must be relevant to the allegations. Moreover, Title IX regulations do not allow questions about a party's sexual predisposition or prior sexual behavior, unless the evidence is needed to establish that someone other than the Respondent committed the alleged conduct or to provide consent).

- Be sensitive, objective, and avoid the appearance of bias
- Invite Complainant to explain the allegations in the Formal Complaint without any interruptions. Avoid making any statements about the allegations or asking targeted questions until after Complainant has the opportunity to describe the allegations free from your input or leading questions.
- After listening to the Complainant/Respondent recount the allegations without interruption, ask for details regarding Who, What, When, Where, Why and How  
Examples:
  - What happened?
  - What was happening before the alleged incident?
  - When did it happen?
  - Where did it happen?
  - Did it happen more than once?
- Was anyone else present? If so, who and for how long?
- Have you spoken to anyone else on the campus or in your department about this? If so, to whom and when?
- Have you spoken to anyone else at all? If so, to whom and when?
- Have you provided a written statement to anyone? If so, do you have a copy?
- Have you posted anything about this online, including on Instagram, snapchat, Facebook, or other social media?
- Have you created or kept any notes, diary entries, or other written records that have anything to do with the allegation?
- Do you know of anyone else who may have a similar complaint or concern?
- How do you know the accused individual?
- Have you had any interactions with the accused, apart from those being discussed today?
- Did the accused use or threaten to use force?
- How have you been affected by this incident?
- What actions or remedy from the school district do you seek by bringing this complaint?
- What else would you want me to know about this incident?

**EXHIBIT N**

<b>Title IX Witness Statement</b>
-----------------------------------

<input type="checkbox"/> Complainant	<input type="checkbox"/> Respondent	<input type="checkbox"/> Witness_____
--------------------------------------	-------------------------------------	---------------------------------------

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex of in educational institutions that receive federal financial assistance. Students, employees, volunteers, and other may provide information relevant to making a determination of responsibility of a Formal Complaint of sexual harassment. **However, no individual can be forced to participate in a Title IX investigation, nor may the district retaliate against any individual for participating in or refusing to participate in a Title IX investigation.**

**Personal Information (Please Print):**

Name of Witness: \_\_\_\_\_

Campus/Department/Position: \_\_\_\_\_

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

Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Email address: \_\_\_\_\_

**Date Incident Occurred:** \_\_\_\_\_

**Location Incident Occurred:** \_\_\_\_\_

**Does any recording or physical record of this incident exist?**

(Select) ☐ Yes or ☐ No

**Is it in your possession?**

(Select) ☐ Yes or ☐ No

**Please describe what you witnessed, where and when.** If you did not witness the incident, describe what you were told and when. (Identify: Who, What, When and Where)

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## EMPLOYEE WELFARE FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

This image shows a single page from a notebook or ledger. It features approximately 20 evenly spaced, thin grey horizontal lines running across its entire width. The background is plain white, and there are no margins, headers, footers, or other markings present.

(Attach additional pages if needed)



EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**Did you report the incident to any other person?** (Select One) ☐ Yes or ☐ No

If yes, please answer the following:

To whom did you report the incident: \_\_\_\_\_

Date and Time of the report: \_\_\_\_\_

Method of reporting: (in person, email, phone) \_\_\_\_\_

**Did you tell any other individual(s) about the incident as you have reported it?**

(Select One) ☐ Yes or ☐ No

If yes, please answer the following:

To whom did you report the incident: \_\_\_\_\_

Date and Time of the report: \_\_\_\_\_

Method of reporting: (in person, email, phone) \_\_\_\_\_

**Retaliation:** The District prohibits retaliation by a District employee against another person alleged to have experienced sexual harassment, serves as a witness, or participates or refuses to participate in an investigation. Examples of retaliation are physical contact or through electronic means and may include hazing, threats, taunting, teasing, confinement, assault, demands for money, destruction of property, theft of valued possessions, name calling, rumor spreading, or ostracism.

**I certify that my statement is true, complete, and factual.**

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Statement Taken by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION  
**EXHIBIT O – 1 Student Interviews**

DIA  
(EXHIBIT)

**Title IX Student Interview Form**

☐ Complainant ☐ Witness \_\_\_\_\_ (A, B, C, etc.)

District Case Number: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Campus: \_\_\_\_\_ Date of Alleged Incident: \_\_\_\_\_

**GENERAL INFORMATION**

Date of Interview: \_\_\_\_\_ Time of Interview: \_\_\_\_\_

Is the interview being recorded? (**Select**) ☐ Yes or ☐ No

Are there video surveillance tapes to view? (**Select**) ☐ Yes or ☐ No

If yes, describe the details. \_\_\_\_\_

**Interviewing the Complainant**

- Be sensitive, objective and avoid the appearance of bias
- Begin the interview by describing its purpose, the District's strong desire to eliminate sexual harassment, and its non-retaliation policy. Inform the Complainant who to contact if he/she experiences retaliation.
- Allow time for the conversation to wander and to develop a rapport in order to reduce stress
- Have the complainant recount the allegations from the Formal Complaint without any interruptions.
- Ask for details regarding who, what, when, where, why and how.
  - Ex. What specifically did the Respondent allegedly say or do?
  - Did it happen more than once? How often?
  - What was happening before the alleged incident? What happened after?

**Interviewer must list each question to be asked and the Complainant response is scripted below each question.** (Questions regarding Complainant's sexual predisposition or prior sexual behavior are not allowed, unless the responses are needed to prove that someone other than the Respondent committed the alleged conduct or to prove consent).

Q 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 2. \_\_\_\_\_

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DIA  
(EXHIBIT)

Q 3.

Q 4.

Q 5.

- Where there any witnesses? (Select) ☐ Yes or ☐ No

List the names of all witnesses revealed in this interview.

1. \_\_\_\_\_
- 2.. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Interviewing a Witness**

- Explain the District's definition of sexual harassment and give each witness a copy of it in writing.
- Explain the need to limit speculation and conversation about the matter outside of the interview in order to protect the witness from allegations of defamation. Also explain District's policy against retaliation for participating as a witness in an investigation.
- Does the person being interviewed have firsthand knowledge of the allegations being investigated? (Select) ☐ Yes or ☐ No  
If no, describe how the witness became aware of the incident.

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FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

- Ask about specific behaviors they have observed.
- Ask if, from their point of view, the alleged harasser was bothering the Complainant and why.
- Ask if the Complainant complained to them about the Respondent's behavior.
- Ask if there are others who might be able to comment on the interaction or if there is any documentation of which they are aware that might relate to the alleged behavior.

**Interviewer must list each question to be asked and the Complainant response is scripted below each question.** (Questions regarding Complainant's sexual predisposition or prior sexual behavior are not allowed, unless the responses are needed to prove that someone other than the Respondent committed the alleged conduct or to prove consent).

Q1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 5. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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DIA  
(EXHIBIT)

➤ Where there any witnesses? (Select) ☐ Yes or ☐ No

List the names of all witnesses revealed in this interview.

1 \_\_\_\_\_

2.. \_\_\_\_\_

3. \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

Completed by:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Person Completing the Interview

\_\_\_\_\_  
Date

**Attach Witness Statement form, additional interview notes, and transcription of recorded witness interview.**

cc: Title IX Coordinator/Designee

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**EXHIBIT O-2**

**Title IX Employee Interview Form**

☐ Complainant      ☐ Respondent      ☐ Witness \_\_\_\_\_ (A, B, C, etc.)

District Case Number: \_\_\_\_\_  
Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_  
Campus: \_\_\_\_\_ Date of Alleged Incident: \_\_\_\_\_

**GENERAL INFORMATION**

Date of Interview: \_\_\_\_\_ Time of Interview: \_\_\_\_\_  
Is the interview being recorded? (Select) ☐ Yes or ☐ No  
Are there video surveillance tapes to view? (Select) ☐ Yes or ☐ No  
If yes, describe the details. \_\_\_\_\_  
\_\_\_\_\_

**Interviewing the Complainant**

- Be sensitive, objective and avoid the appearance of bias
- Begin the interview by describing its purpose, the District's strong desire to eliminate sexual harassment, and its non-retaliation policy. Inform the Complainant who to contact if he/she experiences retaliation.
- Allow time for the conversation to wander and to develop a rapport in order to reduce stress
- Have the complainant recount the allegations from the Formal Complaint without any interruptions.
- Ask for details regarding who, what, when, where, why and how.
  - Ex. What specifically did the Respondent allegedly say or do?
  - Did it happen more than once? How often?
  - What was happening before the alleged incident? What happened after?
- Where there any witnesses?  
List the names of all witnesses revealed in this interview.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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DIA  
(EXHIBIT)

Interviewer must list each question to be asked and the witness response is scripted below each question. (Questions regarding Complainant's sexual predisposition or prior sexual behavior are not allowed, unless the responses are needed to prove that someone other than the Respondent committed the alleged conduct or to prove consent).

Q 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 4. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 5. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Interviewing the Respondent**

- Be sensitive, objective, and avoid the appearance of bias.
- Begin the interview by describing its purpose, the District's prohibition against sexual harassment and its non-retaliation policy. Inform the Respondent who to contact if he/she experiences retaliation as a result of the allegations. Remind the Respondent that she/he is presumed not responsible for the alleged conduct until after the conclusion of the Title IX Grievance Process.

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(EXHIBIT)

- Invite Respondent to begin the conversation by telling you what he or she knows about the allegations in the Formal Complaint and what his or her response is to those allegations.
- Ask broad, open-ended questions to try to get Respondent talking.
- Avoid making any statements about the allegations or asking targeted questions until after Respondent has the opportunity to describe the allegations free from your input or leading questions.
  - If Respondent is reluctant to discuss the allegations, try to discuss neutral topics to develop a rapport and allow the Respondent to gain a comfort level with you.
- Where there any witnesses?

List the names of all witnesses revealed in this interview.

1. \_\_\_\_\_
- 2.. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Interviewer must list each question and any knowledge and information the employee provides.

Q 1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q 3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Q.4 \_\_\_\_\_



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DIA  
(EXHIBIT)

Q 5.

**Interviewing a Witness**

- Explain the District's definition of sexual harassment and give each witness a copy of it in writing.
- Explain the need to limit speculation and conversation about the matter outside of the interview in order to protect the witness from allegations of defamation. Also explain District's policy against retaliation for participating as a witness in an investigation.
- Does the person being interviewed have firsthand knowledge of the allegations being investigated? (Select) ☐ Yes or ☐ No  
If no, describe how the witness became aware of the incident.

- Ask about specific behaviors they have observed.
- Ask if, from their point of view, the alleged harasser was bothering the Complainant and why.
- Ask if the Complainant complained to them about the Respondent's behavior.
- Ask if there are others who might be able to comment on the interaction or if there is any documentation of which they are aware that might relate to the alleged behavior.

List the names of all witnesses revealed in this interview.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

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DIA  
(EXHIBIT)

Interviewer must list each question and any knowledge and information the employee provides.

Q 1. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Q 2. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Q 3. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Q 4. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Q 5. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Attach additional pages of questions and/or answers as needed.)

Completed by:

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Person Completing the Interview

\_\_\_\_\_  
Date

**Attach Witness Statement form and additional interview notes.**

cc: Title IX Coordinator/Designee

**EXHIBIT P**

**Title IX Notice of Opportunity to Inspect and Review Evidence Directly Related to Allegations in the Formal Complaint**

**Instructions to Investigator (delete after reading):**

- The Complainant and Respondent are entitled to an electronic or hard copy of the evidence gathered in the investigation that is directly related to the allegations raised in the formal complaint. This evidence must be sent to each party and the party's advisor, if any, at least ten (10) District business days prior to issuance of the investigative report.
- The Complainant and Respondent must be given an opportunity to submit a written response regarding the evidence within the 10-day period referenced above. If a written response is submitted by either party, the investigator must consider it prior to completion of the investigative report.
- If you know the individual has an advisor, provide a copy of this notice to the advisor as well.
- Print this notice on district letterhead.

[Date]

[Student/Employee Complainant/Respondent/Student's Parent/Guardian]

[Address]

**Re:** Opportunity to Inspect and Review Evidence Directly Related to Allegations Raised in the Title IX Formal Complaint

District Case Number: \_\_\_\_\_

Dear Mr./Ms. \_\_\_\_\_

You have the right to inspect and review any evidence obtained as part of the investigation that is directly related to the allegations raised in the formal complaint of sexual harassment involving you.

The evidence may be provided in a format that prevents copying or downloading in order to protect the confidentiality of information in education records for the employees involved.

You may submit a written response within 10 days of reviewing the evidence. Your written response will be considered before I complete the investigative report.

The evidence will be provided to you [indicate the method in which you will be providing the evidence, for example: The evidence will be provided to you by accessing the One Drive link below] beginning on [list date] and ending on [list date].

Sincerely,

\_\_\_\_\_  
Signature

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee; Advisor/Attorney(if applicable)

**EXHIBIT Q**

**Title IX Investigative Report**

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance.

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

District Case Number: \_\_\_\_\_

A Formal Complaint was filed on [date] by [Name of Complainant or Title IX Coordinator]. This investigative report contains a summary of the evidence gathered through the District's investigation of the Formal Complaint, as part of the District's Title IX Grievance Process.

This investigation was conducted by: [list role and full name] from [date] to [date].  
On [list full date], the Investigator emailed both parties involved, an official notification of their opportunity to inspect and review the evidence gathered in this investigation, and an opportunity to provide a written response to the evidence.

**Allegations**

The Complainant reported allegations potentially constituting sexual harassment against the Respondent. [Identify the allegations potentially constituting sexual harassment]

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**Procedural Steps**

Procedural steps taken from the receipt of the Formal Complaint to date:

- A Formal Complaint was filed on [list the date].
- The Title IX Coordinator provided the Complainant and the Respondent with written notice of the Complaint and their rights in the grievance process on [list date].
- The Title IX Coordinator appointed [list the name of the Investigator and title], as the Investigator on [list date].
- The Investigator reviewed the Formal Complaint and relevant district policy beginning [list date].
- The Investigator sent written notice of interviews and rights to both parties and to their advisors, if any, on [date].
- The Investigator interviewed the Complainant on [date] [list the platform if the interview was not conducted in person—e.g., via TEAMS].
- The Investigator interviewed the witness(es) [list Witness A] identified by Complainant on [dates] [and list the method, if not conducted in person].

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DIA  
(EXHIBIT)

- The Investigator interviewed Employee 1, as a person of interest from information gathered through the course of the investigation. Employee 1 was interviewed on [list date] and [list the method, if not conducted in person].
- The Investigator interviewed the Respondent on [date] [and list the method, if not conducted in person].
- The Investigator interviewed the witnesses identified by the Respondent on [dates] [and list the method, if not conducted in person].
- The investigator gathered, catalogued, reviewed, and collected evidence submitted by both the Complainant and the Respondent. The Investigator gathered available video evidence from [list the location of the cameras] dated [list the dates] and time stamped [list the time].
- The parties were also given the opportunity to submit evidence during the investigation. The Complainant submitted evidence on [list date] for consideration and the Respondent submitted evidence for consideration on [list date], which was reviewed by the Investigator.
- The Investigator completed secondary interviews with Complainants, witnesses, additional witnesses, or Respondent. [if applicable] [identify witnesses and dates]
- The parties were given the opportunity to inspect and review evidence and submit a written response. Official notification to inspect and to review the evidence was sent to the Complainant and the Respondent on [list date]. Each party was provided with detailed instructions regarding the timeline in which to submit their written responses to the Investigator. Each party was given until the end of the business day on [list date] to submit their written responses to the evidence. [Must be 10 district business days from date of parties' receipt of evidence for review]
- The Complainant submitted their written response to the Investigator for consideration on [list date] via [mail or email] or [from the Complainant's Advisor].
- The Respondent submitted their written response to the Investigator for consideration [list date] via [mail or email] or [from the Respondent's Advisor].
- [List any other procedural steps not previously stated or taken by you as the Investigator.]
- Official notification of the submission of the Investigative Report, including the name of the assigned Decision Maker, was sent to all parties on [list date] via email and United States mail with an opportunity to submit their written responses to the Decision Maker by [list 10 district business day timeline].

**Case Facts:**

**I. Factual information about the parties:**

**A. Complainant**

[Student] The Complainant is a [ ] year-old [female/ male] student at [list campus]. The student is classified as a [list the grade] and is on track to graduate [list the month and year], [if applicable.] The student was within the compulsory attendance requirements of the state of Texas [if this is not the case, state the student's attendance standing].

[Adult employee] -The Complainant is an adult [female/male] who is employed by the District as a/an \_\_\_\_\_ [position] at \_\_\_\_\_ [campus/department].

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(EXHIBIT)

**B. Respondent**

The Respondent is an adult [female/ male] who is employed by the District as a/an \_\_\_\_\_ [position] at \_\_\_\_\_ [campus/department].

**II. Relevant Sections of Board Policy**

- A. DIA (LOCAL): The District prohibits discrimination, including harassment, against any employee on the basis of race, color, religion, sex, national origin, age, disability, or any other basis prohibited by law. Retaliation against anyone involved in the complaint process is a violation of District policy and is prohibited.

Any employee who believes that he or she has experienced prohibited conduct or believes that another employee has experienced prohibited conduct should immediately report the alleged acts. The employee may report the alleged acts to his or her supervisor or campus principal. Alternatively, the employee may report the alleged acts to one of the District officials, including the Title IX Coordinator, ADA/Section 504 Coordinator, or the Superintendent.

"Sexual harassment" is a form of sex discrimination defined as unwelcome sexual advances; requests for sexual favors; sexually motivated physical, verbal, or nonverbal conduct; or other conduct or communication of a sexual nature when:

- 1) Submission to the conduct is either explicitly or implicitly a condition of an employee's employment, or when submission to or rejection of the conduct is the basis for an employment action affecting the employee; or
- 2) The conduct is so severe, persistent, or pervasive that it has the purpose or effect of unreasonably interfering with the employee's work performance or creates an intimidating, threatening, hostile or offensive work environment.

- B. Prohibited "sexual harassment" also includes "sexual harassment" as defined by Title IX regulations (see FFH(LEGAL)): "Sexual harassment" means conduct on the basis of sex that satisfies one or more of the following:

- 1) An employee of the district conditioning the provision of an aid, benefit, or service of the district on an individual's participation in unwelcome sexual conduct;
- 2) Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the district's education program or activity; or
- 3) "Sexual assault" as defined in 20 U.S.C. 1092(f)(6)(A)(v), "dating violence" as defined in 34 U.S.C. 12291(a)(10), "domestic violence" as defined in 34 U.S.C. 12291(a)(8), or "stalking" as defined in 34 U.S.C. 12291(a)(30).

EMPLOYEE WELFARE

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(EXHIBIT)

C. DH(LOCAL): An employee shall not engage in prohibited harassment, including sexual harassment, of:

- 1) Other employees. [See DIA]
- 2) Students. [See FFH; see FFG regarding child abuse and neglect.]

While acting in the course of employment, an employee shall not engage in prohibited harassment, including sexual harassment, of other persons, including Board members, vendors, contractors, volunteers, or parents.

D. DH (EXHIBIT) Educators' Code of Ethics states as follows:

Standard 2.2 The educator shall not harm others by knowingly making false statements about a colleague or the school system.

Standard 2.3 The educator shall not intentionally, knowingly, or recklessly misrepresent facts regarding a student.

E. EMS ISD Employee Handbook – The Employee Handbook states that “All district employees should perform their duties in accordance with state and federal law, district policies, procedures, and ethical standards. Violation of policies, regulations, and guidelines, including intentionally making a false claim, offering false statements, refusing to cooperate with a district investigation may result in disciplinary action, including termination.”

III. A Police report [was/was not] filed [state which PD and by whom and list the report]

IV. Evidence from witnesses [state the Witnesses and that they provided a written statement] written statements are included in the catalogued list of evidence submitted with this report. [Summarize evidence gathered during investigation. Example: Witness A said “\_\_\_\_\_.”]

V. Physical or other evidence [All physical evidence was gathered, catalogued, reviewed, and considered by the Investigator]. Relevant evidence was placed in One Drive folder and made accessible to all parties at the same time through formal email notification from the Investigator. [Summarize evidence gathered during investigation.] [Example: The video footage showed \_\_\_\_\_.]

This is the final investigative report regarding this Title IX Formal Complaint. The Decision Maker will allow all parties to submit relevant written questions for the other party or witnesses before the determination of responsibility for sexual harassment is made.

The final Investigative Report was made available to all parties on [list the date] and in the formats listed below.

[Select one] ☐ Hard copy ☐ Electronic Copy Date: \_\_\_\_\_

Signature

Date

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

cc: Decision Maker and Title IX Coordinator

**EXHIBIT R**

<b>Title IX Notice of Investigative Report and Assigned Decision Maker</b>
--

**Instructions to Investigator (delete after reading):**

- The Complainant and Respondent are entitled to review the Investigative Report.
- The Complainant and Respondent should be given the opportunity to submit questions to the decision maker.
- If the complainant is a student, address this to the student's parent/guardian in addition to the student.
- Print this notice on district letterhead.
- If you know the individual has an advisor, provide a copy of this notice to the advisor as well.

[Date]

[Student or Employee Complainant/Respondent/Student's Parent/Guardian]  
[Address]

Re: Notice of Investigative Report

District Case Number: \_\_\_\_\_

Dear Mr./Ms. \_\_\_\_\_:

Enclosed please find the investigation report in the above-referenced Title IX complaint. You may submit a written response of relevant questions<sup>1</sup> that you would like asked of the other party(ies) or witness(es) to the Decision Maker no later than [list date deadline = 10 District business days].

This notice serves to inform you that \_\_\_\_\_  
has been assigned as the Decision Maker for this formal complaint and they can be contacted at [Decision Maker email].

Sincerely,

\_\_\_\_\_  
Signature

[Name]

Title IX Investigator

[Address]

[Phone]

[Email]

Enclosure: Title IX Investigative Report

cc: Title IX Coordinator/Designee  
Advisor/Attorney (if applicable)

<sup>1</sup> Questions regarding a Complainant's sexual predisposition or prior sexual behavior are not allowed, unless the responses are needed to prove that someone other than the Respondent committed the alleged conduct or to prove consent



**EXHIBIT S**

<b>Title IX Notice of Exclusion of Questions Submitted</b>
--

**Instruction to Decision Maker (delete after reading):**

- If the questions from the Complainant or Respondent regarding the Investigative Report are not relevant or are about a party's sexual predisposition or prior sexual behavior that is not evidence that establishes evidence that is needed to prove that someone other than the Respondent committed alleged conduct or to prove consent, then this notice must be sent.
- If the individual is a student, address this to the student's parent/guardian in addition to the student.
- If you know the individual has an advisor/attorney, provide a copy of this notice to the advisor as well.

[Date]

[Student or Employee Complainant/Respondent/Parent/Guardian]

[Address]

Re: Notice of Exclusion of Questions Submitted

District Case No. \_\_\_\_\_

Dear Mr./Ms. \_\_\_\_\_:

This letter is regarding the questions you submitted in response to the Investigative Report. Questions must be relevant to the allegations. Moreover, Title IX regulations do not allow questions about a party's sexual predisposition or prior sexual behavior, unless the evidence is needed to establish that someone other than the Respondent committed the alleged conduct or to provide consent.

The following question(s) will not be submitted to the other party for the following reasons:

- [Insert question here]. The question has been excluded because it is not relevant to the allegations, does not relate to the merits of this case, and is not likely to produce evidence that will help me make a determination of responsibility in this complaint.
- [Insert question here]. The question poses an impermissible inquiry about the party's sexual predisposition or past sexual behavior that does not meet an exception listed above.

Sincerely,

\_\_\_\_\_  
Signature

[Name]

Title IX Decision Maker

[Address]

[Phone]

[Email]

cc: Title IX Coordinator/Designee  
Advisor/Attorney ( if applicable)

DATE ISSUED: 09/01/2021

DIA (EXHIBIT)

**EXHIBIT T**

**Title IX Determination of Responsibility Sexual Harassment Decision**

**Instructions for the Title IX Decision Maker (delete after reading):**

- **The determination of responsibility decision must be sent simultaneously to the Complainant and Respondent.**
- **If either party has an advisor/attorney, provide a copy of this decision to the advisor as well.**

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance.

**CASE INFORMATION (Please Print):**

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

District Case Number: \_\_\_\_\_

Complainant: \_\_\_\_\_

Campus/Department/Position: \_\_\_\_\_

Respondent: \_\_\_\_\_

Campus/Department/Position: \_\_\_\_\_

On \_\_\_\_\_, the District received a Formal Complaint of alleged sexual harassment concerning the Complainant and Respondent identified above.

**Specific Allegations**

**Describe the specific allegations at issue listed in the Formal Complaint which must include the date of the incident, and the time of the incident, if known. Please use the term Complainant and Respondent.**

**Nature of Allegations:**

**Select the allegations potentially constituting sexual harassment under the Title IX regulations.**

- 1) An employee of the district conditioning the provision of an aid, benefit, or service of the district on an individual's participation in unwelcome sexual conduct;
- 2) Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the district's education program or activity (hostile environment); or
- 3) "Sexual assault" as defined in 20 U.S.C. 1092(f)(6)(A)(v), "dating violence" as defined in 34 U.S.C. 12291(a)(10), "domestic violence" as defined in 34 U.S.C. 12291(a)(8), or "stalking" as defined in 34 U.S.C. 12291(a)(30).

**Procedural Steps**

**Describe the procedural steps taken from the receipt of the Formal Complaint to date:**

- A report of alleged sexual harassment was received by the campus/Title IX Coordinator's office on [date].

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DIA  
(EXHIBIT)

- The Complainant was contacted on [date] by the Title IX Coordinator's office and provided with information about the Grievance Process and supportive and protective measures [via TEAMS or phone conference.]
- A Formal Complaint was filed on [date] by \_\_\_\_\_.
- The Title IX Coordinator provided the Complainant and Respondent with written notice of the allegations and the District's Grievance Process for handling Formal Complaints of sexual harassment under Title IX.
- The Respondent was placed on administrative leave on \_\_\_\_\_ during the pendency of the investigation and Title IX Formal Complaint process.
- The Title IX Coordinator appointed \_\_\_\_\_ to investigate the Formal Complaint.
- The Investigator reviewed the Formal Complaint and relevant district policy beginning [date].
- The Investigator sent written notice of interviews and rights to an advisor on [date].
- The Investigator interviewed the Complainant on [date].
- The Investigator interviewed witnesses identified by Complainant on [dates].
- The Investigator interviewed the Respondent on [date].
- The Investigator interviewed witnesses identified by the Respondent on [dates].
- The Investigator gathered, catalogued, reviewed, and collected evidence including that submitted by Complainant, Respondent, and witnesses.
- The Investigator completed secondary interviews with Complainants, witnesses, additional witnesses, or Respondent. [Delete if not applicable]
- The parties were given the opportunity to inspect and review evidence and to submit a written response within 10 District business days of receiving such evidence [list the date range].
- The parties [submitted or did not] submit written responses on [date] that were considered by the Investigator prior to completion of the Investigative Report.
- The completed Investigative Report was provided to both parties on [date], and both parties were provided written notice of an opportunity to submit written responses to the assigned Decision Maker at least 10 District business days prior to the completion of this Determination of Responsibility.
- After receiving the completed Investigative Report, the parties had the opportunity to submit written relevant questions to one another and to witnesses and to review responses. The Complainant [submitted or did not submit] a written response on [date]. The Respondent [submitted or did not submit] a written response on [date].

**Evidence Gathered During Investigation**

**I. Factual information about the parties**

**A. Complainant**

[Student] The Complainant is a \_\_\_\_\_ year-old [female/male] student at [list campus]. The student is classified as a [list the grade] and is on track to graduate [list the month and year, if applicable.] At the time of the incident [list date] the Complainant is within the compulsory attendance requirements for the state of Texas.

EMPLOYEE WELFARE

FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

[Adult employee] The Complainant is an adult [female/male] who is employed by the District as a/an \_\_\_\_\_ [position] at \_\_\_\_\_ [campus/department].

B. Respondent

The Respondent is an adult [female/ male] who is employed by the District as a/an \_\_\_\_\_ [position] at \_\_\_\_\_ [campus/department].

**II. Evidence Obtained from Parties and Witnesses**

In this section you will list all catalogued evidence collected (such as written statements, interview notes, video footage, emails, photos, text messages, etc.) and who provided the evidence (do not use names, but Complainant, Respondent, Witness A or Witness B) and you will need to include specifics about the evidence obtained (what relevant information was obtained from the statements, interview, video, emails, photos, text message, etc.) (For example, this video shows the Complainant and Respondent getting in the car.)

**Findings and Conclusions**

In this section, you set forth what you, as the Decision Maker, believed happened based on your evaluation and weighing of the evidence.

After considering the investigative report and relevant evidence weighed in accordance with the preponderance-of-the-evidence standard set forth in District policy, I hereby make the following findings:

1. For example, the Respondent sent four text messages to the Complainant on requesting sexual favors such as:
- 2.
- 3.

Applying the District's Board Policy to the above findings, I hereby conclude as follows: Explain whether the findings above do or do not violate Board Policy. Include the specific language/provision at issue from the Code of Ethics and identify where that provision is located.

**Determination of Responsibility**

After careful review of both inculpatory and exculpatory evidence presented in this matter, and applying the preponderance-of-the-evidence standard as the standard of evidence, this Decision Maker concludes as follows: Respondent \_\_\_\_\_ is found [responsible/not responsible] for the allegations of [sexual assault/sexual harassment] made by Complainant \_\_\_\_\_.

**Disciplinary Actions and Remedies**

If Respondent is determined to be responsible for any allegations of sexual harassment, describe any disciplinary actions the District will impose on the Respondent. The District must provide remedies to the Complainant. Describe each remedy designed to restore or preserve equal access to the District's education program or activity to be provided by the District.

EMPLOYEE WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT AND RETALIATION

DIA  
(EXHIBIT)

**Disciplinary Actions Imposed Against Respondent are as follows:** [select the disciplinary actions and provide details in how and when they will be implemented]

1. Warning
2. Explain in detail the District's discrimination/harassment policy and expectations of appropriate conduct.
3. Provide counseling regarding appropriate behavior expectations and appropriate peer-to-peer conversations
4. Continuation of the current Stay-Away Directive through (list date)
5. Review the current Stay-Away Directive at the conclusion of the date listed in the above #4 bullet and make a determination for an additional continuation of the directive.
6. Explaining to a respondent in detail the District's anti-sexual harassment policy and expectations of appropriate conduct.
7. Stay away agreement/No contact directives
8. Referral to Human Resources for review of termination of employment
9. Other: \_\_\_\_\_
10. Other: \_\_\_\_\_

**Remedies to Complainant are as follows:** [select the remedies and provide details in how and when they will be implemented]

1. Explaining to a complainant and respondent in detail the District's non-discrimination harassment policy and expectations of appropriate conduct.
2. Campus/department escort
3. Increased monitoring of [location] for [time period e.g., next 6 or 9 weeks]
4. Employee Assistance Program
5. Continuation or the implementation of a Stay Away Directive through [list date]
6. Other: \_\_\_\_\_
7. Other: \_\_\_\_\_

The remedies listed above are designed to restore or preserve equal access to the District's educational programs.

**Notice of Right to Appeal this Decision**

Either party has the right to appeal this decision under the District's Title IX Grievance Process by filing a written Notice of Appeal with the District's Title IX Coordinator within 5 District business days of the date of this Determination of Responsibility. Appeals are available for the following reasons only:

1. Procedural irregularity that affected the outcome of the matter.
2. New evidence that was not reasonably available at the time the determination regarding responsibility was made, that could affect the outcome of the matter; and
3. The Title IX Coordinator, investigator(s), or decision maker(s) had a conflict of interest or bias for or against complainants or respondents generally or the individual complainant or respondent that affected the outcome of the matter.

EMPLOYEE WELFARE  
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DIA  
(EXHIBIT)

This determination of responsibility will become final either on the date that the District provides the parties with the written determination of the result of the appeal, if an appeal is filed, or if an appeal is not file, the date on which an appeal would no longer be considered timely.

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Signature	Date
[Name]	
Title IX Decision Maker	
[Address]	
[Phone]	
[Email]	

The determination of responsibility was provided to the following persons simultaneously:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Title IX Coordinator | <input type="checkbox"/> Complainant                  | <input type="checkbox"/> Complainant's Advisor, if any |
| <input type="checkbox"/> Respondent           | <input type="checkbox"/> Respondent's Advisor, if any | <input type="checkbox"/> Other: _____                  |

List the date and which method of delivery the Determination of Responsibility was provided to both parties.[Select one]

- |  |             |
|--|-------------|
| <input type="checkbox"/> Hard Copy         | Date: _____ |
| <input type="checkbox"/> Electronic format | Date: _____ |

Enclosure: Appeal Form

cc: Title IX Coordinator/Designee  
Advisor/Attorney (if applicable)

**EXHIBIT U**

<b>Title IX Determination of Responsibility Appeal Form</b>
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Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance.

Either party may appeal the determination of responsibility under the District's Title IX grievance process by filing an appeal within 5 District business days of the date of the Determination of Responsibility. The other party will be provided a copy of this appeal.

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**APPEAL REQUESTER'S INFORMATION (Please Print):**

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

District Case Number: \_\_\_\_\_

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

Date of Title IX Determination of Responsibility: \_\_\_\_\_

**This appeal must be submitted to the Title IX Coordinator within 5 District business days of the date of the Determination of Responsibility to:**

**Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator,  
1600 Mustang Rock Road, Saginaw, Texas 76179, or;  
email at [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).**

Once an appeal is received, the other party will be notified and provided with an opportunity to submit a written response within 5 District business days. An Appellate Decision Maker, who was not the Investigator, nor the Title IX Coordinator, or the Decision Maker, will be assigned to make a decision on the appeal. Both parties will be provided notification of the outcome.

**Basis of Appeal:**

- ☐ Procedural irregularity that affected the outcome of the matter;
- ☐ New evidence that was not reasonably available at the time the determination regarding responsibility was made, that could affect the outcome of the matter; or
- ☐ The Title IX Coordinator, investigator(s), or decision maker(s) had a conflict of interest or bias for or against Complainants or Respondents generally or against the individual Complainant or Respondent that affected the outcome of the matter.

Please describe the basis for your appeal and attach any supporting evidence and documents.

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**EXHIBIT V**

<b>Title IX Dismissal of Formal Complaint Appeal Form</b>
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Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance. The other party will be provided a copy of this appeal.

**APPEAL REQUESTER'S INFORMATION (Please Print):**

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

District Case Number: \_\_\_\_\_

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

Date of Title IX Dismissal of Formal Complaint: \_\_\_\_\_

**This appeal must be submitted to the Title IX Coordinator within 5 District business days of the date of the Dismissal of the Formal Complaint to:**

**Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator,  
1600 Mustang Rock Road, Saginaw, Texas 76179, or;  
email at [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).**

You have the right to appeal the dismissal of your formal complaint, as explained in Policy DIA (Administrative Regulation) and DGBA(LOCAL) beginning at Level Two.

**Basis of Appeal:**

- ☐ Procedural irregularity that affected the outcome of the matter;
- ☐ New evidence that was not reasonably available at the time the dismissal of the formal complaint was made, that could affect the outcome of the matter; or
- ☐ The Title IX Coordinator, investigator(s), or decision maker(s) had a conflict of interest or bias for or against Complainants or Respondents generally or against the individual Complainant or Respondent that affected the outcome of the matter.

Please describe the basis for your appeal and attach any supporting evidence and documents.

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**EXHIBIT W**

<b>Title IX Notice of Appeal of the Determination of Responsibility</b>
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**Instructions for Title IX Coordinator/Designee (delete after reading):**

- This notice must be sent to both parties when one of the parties has filed an appeal of the determination of responsibility.
- If individual is a student, address this to the student's parent/guardian in addition to the student.
- Print this notice on district letterhead.
- If you know the individual has an advisor, provide a copy of this notice to the advisor as well.

[Date]

[Adult Student/Employee Complainant/Respondent/Parent/Guardian/]  
[Address]

Re: Notice of Appeal of Determination of Responsibility

District Case No. \_\_\_\_\_

Dear \_\_\_\_\_:

The [Complainant/Respondent] in the above referenced matter filed an appeal of the Decision Maker's determination of responsibility. A copy of the appeal is enclosed. You may, but are not required to, submit a written response in support of or challenging the appeal of the determination of responsibility. If you would like to submit a written response, please do so no later than 5 District business days. Please send the response via mail to:

**Dr. Maria Gamell, Executive Director of Human Resources and Title IX Coordinator,  
1600 Mustang Rock Road, Saginaw, Texas 76179, or;  
email at [T9Coordinator@ems-isd.net](mailto:T9Coordinator@ems-isd.net).**

The Title IX Coordinator will provide the response to the Appellate Decision Maker, who will issue a final decision regarding the appeal of the determination of responsibility.

The Title IX Coordinator has assigned \_\_\_\_\_ as the Appellate Decision Maker.

Sincerely,

\_\_\_\_\_  
Signature

[Name]

Title IX Coordinator/Designee

[Address]

[Phone]

[Email]

cc: Advisor/Attorney (if applicable)  
Enclosure: Appeal Form of Determination of Responsibility

**EXHIBIT X**

**Title IX Decision on Appeal of Determination of Responsibility**

**Instructions for Appellate Decision Maker (delete after reading):**

- This decision should be sent simultaneously to the Complainant and Respondent.
- Print on district letterhead.
- If either party has an advisor/attorney, provide a copy of this decision to the advisor as well.

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on sex in educational institutions that receive federal financial assistance.

**APPEAL REQUESTOR'S INFORMATION (Please Print)**

District Case No. \_\_\_\_\_

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

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone Numbers: (Cell) \_\_\_\_\_ Work: \_\_\_\_\_

**Appeal Basis:**

Appeal was based on: [Check all that apply]

- ☐ Procedural irregularity that affected the outcome of the matter.
- ☐ New evidence that was not reasonably available at the time the determination regarding responsibility was made, that could affect the outcome of the matter; or
- ☐ Title IX Coordinator, investigator(s), or decision-maker had a conflict of interest or bias for or against complainants or respondents generally or against the individual complainant or respondent that affected the outcome of the matter.

After carefully considering the submitted appeal attached to this page, there [will/will not] be a change in the Determination of Responsibility. If there is a change of decision, a new decision form will be attached to the back of this page. This is the final decision regarding this complaint, and the District will consider all matters related to the above-referenced Case Number to be concluded. Records from this investigation and decisions will be kept by the district for seven (7) years. Any disciplinary proceedings associated with the final Determination of Responsibility will now commence in accordance with Board Policy.

Signature \_\_\_\_\_

Date \_\_\_\_\_

[Name]

Appellate Decision Maker

[Address]

[Phone]

[Email]

Enclosure: Appeal Form