HOLLEY CENTRAL SCHOOL DISTRICT
DISCRIMINATION, HARASSMENT, AND/OR RETALIATION COMPLAINT FORM

The District prohibits discrimination and harassment on school property and at school functions on the basis of any legally protected class including, but not limited to: race; color; religion; disability; national origin; sexual orientation; gender identity or expression; military status; sex; age; and marital status.

If you believe that you have been subjected to or have witnessed discrimination, harassment, and/or retaliation, you are encouraged to report it to the District. You will not be retaliated against for making a report.

The District will promptly respond to reports of discrimination, harassment, and/or retaliation, ensure that all investigations are conducted within a reasonably prompt time frame and under a predictable fair grievance process that provides due process protections, and impose disciplinary measures and implement remedies when warranted.

Instructions

The District will investigate all complaints of discrimination and/or harassment regardless of the form in which those complaints are made. However, this form may be used to make a report of discrimination, harassment, and/or retaliation.

Once completed, it should be submitted to the District's Civil Rights Compliance Officer (CRCO) in person or by mail, email, or other method made available by the District. Completing this form as thoroughly as possible will assist the District in providing for the prompt, thorough, and equitable resolution of all allegations. Inquiries about the completion or submission of this form may be directed to the District's CRCO or a trusted staff member with whom you feel comfortable.

The District has designated the following District employee(s) to serve as its CRCO(s):

> Stephanie Sanchez; Director of Special Programs; 3800 North Main St.; Holley, NY 14470; 585-638-6316, ext. 2401; ssanchez@holleycsd.org.

If you are more comfortable reporting orally or in another manner, the person to whom you report the discrimination, harassment, and/or retaliation will complete this form, provide you with a copy, and follow any required processes.

You may use additional sheets of paper if needed and attach any relevant materials or evidence to this complaint form.

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HOLLEY CENTRAL SCHOOL DISTRICT
DISCRIMINATION, HARASSMENT, AND/OR RETALIATION COMPLAINT FORM
(Cont'd.)

Information about the Complainant
(The person who is making the report of discrimination, harassment, and/or retaliation)

First and last name: _____

Complainant's relationship to the District:
(Check all that apply)

[ ] Student [ ] Employee [ ] Job applicant
[ ] Parent/legal guardian [ ] Volunteer [ ] Contractor/subcontractor/vendor/consultant
[ ] Student teacher [ ] Intern [ ] Other _____

Primary building or location: _____

Further details including, if applicable, grade or title: _____

Complainant's contact information:

Address: _____

Home phone: _____ Cell phone: _____ Work phone: _____

Email: _____

Select preferred communication method:

[ ] Home phone [ ] Cell phone [ ] Work phone [ ] Email [ ] In-person

Information about the Alleged Victim
(*The person alleged to have experienced the discrimination, harassment, and/or retaliation.*)

Is the complainant the alleged victim? [ ] Yes [ ] No

If the complainant is not the alleged victim, complete the following as thoroughly as possible.

First and last name: _____

Alleged victim's relationship to the District:
(*Check all that apply*)

[ ] Student [ ] Employee [ ] Job applicant
[ ] Parent/legal guardian [ ] Volunteer [ ] Contractor/subcontractor/vendor/consultant
[ ] Student teacher [ ] Intern [ ] Other _____

Primary building or location: _____

Further details including, if applicable, grade or title: _____

(Continued)

HOLLEY CENTRAL SCHOOL DISTRICT
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(Cont'd.)

Alleged victim's contact information:

Address: _____

Home phone: _____ Cell phone: _____ Work phone: _____

Email: _____

Information about the Respondent
(*The person alleged to have perpetrated the discrimination, harassment, and/or retaliation.*)

First and last name: _____

Respondent's relationship to the alleged victim:

[ ] Classmate [ ] Teacher [ ] Student [ ] Supervisor
[ ] Subordinate [ ] Co-worker [ ] Other _____

Respondent's relationship to the District:

[ ] Student [ ] Employee [ ] Job applicant
[ ] Parent/legal guardian [ ] Volunteer [ ] Contractor/subcontractor/vendor/consultant
[ ] Student teacher [ ] Intern [ ] Other _____

Primary building or location: _____

Further details including, if applicable, grade or title: _____

Respondent's contact information:

Address: _____

Home phone: _____ Cell phone: _____ Work phone: _____

Email: _____

Information about the Alleged Incident(s)
(*Check all that apply*)

[ ] Discrimination -- Generally stated, discrimination consists of the differential treatment of an individual or group of people on the basis of their membership in a legally protected class.

[ ] Harassment -- Generally stated, harassment consists of subjecting an individual, on the basis of membership in a legally protected class, to unwelcome conduct and/or communications.

[ ] Retaliation -- Generally stated, retaliation consists of subjecting an individual to adverse action because the individual participated in a legally protected activity.

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(Cont'd.)

Indicate the basis of discrimination and/or harassment:
(*Check all that apply*)

[ ] Age	[ ] Creed	[ ] Sexual orientation
[ ] Sex	[ ] Religion	[ ] Gender identity or expression
[ ] Race	[ ] Marital status	[ ] Predisposing genetic characteristics
[ ] Color	[ ] Familial status	[ ] Criminal arrest or conviction record
[ ] National Origin	[ ] Military status	[ ] Status as a victim of domestic violence
[ ] Disability	[ ] Retaliation	

[ ] Other [specify what you believe to be the basis of the discrimination and/or harassment] ____

_____

Describe the alleged incident(s) of discrimination, harassment, and/or retaliation and how it has affected you. **Include any known date(s), time(s), and place(s) of the alleged incident(s).**

_____

_____

_____

_____

_____

_____

_____

_____

Is the discrimination, harassment, and/or retaliation continuing? [ ] Yes [ ] No

Information about Witnesses

List the names and known contact information for any witnesses, individuals who may have information related to this report, or individuals you have discussed the alleged incident(s) with:

_____

_____

_____

_____

(Continued)

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(Cont'd.)

Information about Previous Reports

Have you previously reported or provided information (oral or written) about this or related incidents? If yes, when and to whom did you report information to? What was the remedy, outcome, or resolution?

_____

_____

_____

Information about Legal Counsel

If you have obtained legal counsel and would like the District to work with them, provide their name and contact information:

_____

_____

Additional Information

Did you use additional sheets of paper and/or attach any relevant materials or evidence in completing this form? [ ] Yes [ ] No

If yes:

Indicate how many additional sheets of paper have been attached: _____

Identify all relevant materials and evidence that have been attached: _____

_____

_____

I certify that the facts in this report are true to the best of my knowledge, information, and belief.

First and last name: _____

Signature: _____

Date: _____

For District Use Only

Complaint initially received on: _____

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HOLLEY CENTRAL SCHOOL DISTRICT
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(Cont'd.)

Form initially completed by:

[ ] The complainant

[ ] _____ based on an oral report
(*name and title*)

[ ] _____ based on a written report
(*name and title*)

[ ] Other _____

Indicate to whom and the date that this complaint was forwarded, if at all: _____

_____