

SEXUAL HARASSMENT AND DISCRIMINATION COMPLAINT FORM

Department of Human Resources Lincoln Public Schools

The Lincoln Public School District does not discriminate on the basis of sex in any educational program or activity that it operates. The District is required by Title IX (20 U.S.C. § 1681) and 34 CFR Part 106 not to discriminate in any such manner. This requirement not to discriminate also applies to admission and employment. Any inquiries about the application of Title IX may be referred to the District's Title IX Coordinator, to the Assistant Secretary of the Office of Civil Rights, or both.

Refer to Board Regulation 4880.3 for the particulars of the formal complaint process. You may attach additional materials to this form if needed.

The Title IX Coordinator may be contacted if you have questions about filling out this complaint form:

Blake Simpson
TITLE IX COORDINATOR
5905 O Street, Lincoln, NE 68510
402-436-1571
bsimpso3@LPS.org

Ryan Zabawa
TITLE IX COORDINATOR
5905 O Street, Lincoln, NE 68510
402-436-1650
rzabawa@LPS.org

Name: _____ Date: _____

Note: You may attach additional documentation to your complaint if needed.

1. Description of the allegation:

2. Name of Respondent: _____

3. Names of any witnesses to the matter being complained about:

4. Identify and attach any document supporting the complaint:

5. Relief requested (what I want done in response to this complaint):

Please Note: By filing a formal complaint under Board Regulation 4880.3 you are agreeing to the following terms:

- Your identity will be shared with the respondent to the formal complaint.
- Specifics of your allegations shall be shared with the respondent to the formal complaint.
- Any evidence obtained during the scope of the investigation into the formal complaint shall be shared with you and the respondent to the formal complaint equally.
- The respondent is presumed not responsible for the allegations alleged in the formal complaint.
- You will actively participate in the complaint process as requested by the Title IX Coordinator, Investigator, Decision-Maker, and Superintendent
- You understand that the complaint process as outlined in Board Regulation 4880.3 has federally mandated timelines and require this complaint process be completed within a reasonable timeframe, including the time required for the investigation, decision-making, and appeal process.
- You understand that you and the respondent to the formal complaint have the right to appeal any decision of responsibility made by the Decision-Maker.
- You understand that any decision made by the Superintendent is final.

☐ _____: By checking or initialing this box, I do give consent to the formal complaint process and I do agree to the terms outlined above.

☐ _____: By checking or initialing this box, I do not give consent to the formal complaint process and I do not agree to my identity being shared with the respondent to this complaint except as necessary to resolve my complaint. By checking this box, I am opting for my allegations to be treated under Subsection A of Board Regulation 4880.3 and for my allegations to be treated as an informal complaint. I understand that under Subsection A of Board Regulation 4880.3 the District will nonetheless investigate and take prompt and effective action to remediate the concerns I have raised, if appropriate, such as supportive measures.

The undersigned states: The facts in this complaint are true to the best of my knowledge, information and belief. I give permission for an investigation to be made into this complaint. I understand that the District will take steps to prevent me from being retaliated against for filing this complaint, that I am to notify the District if any such retaliation occurs, and that the District will take prompt and strong responsive action if retaliation occurs.

Signature: _____ Date: _____

Received by: _____ Date: _____

Title IX Coordinator: _____ Date Received: _____