



St. Cloud Area School District 742

Sexual Harassment Title IX Report Form

St. Cloud Area Schools is committed to creating a safe and caring climate and culture for all students and employees. The District maintains a firm policy prohibiting all forms of discrimination, harassment, violence and bullying.

The school district specifically prohibits discrimination on the basis of sex in all forms, including sexual harassment, and discrimination or harassment on the basis of sexual orientation or gender identity. (See Board Policy 522).

The school district does not discriminate on the basis of sex in its education programs or activities, and it is required by Title IX of the Education Amendments Act of 1972, and its implementing regulations, not to discriminate in such a manner. The requirement not to discriminate in its education program or activity extends to admission and employment. The school district is committed to maintaining an education and work environment that is free from discrimination based on sex, including sexual harassment, and discrimination or harassment on the basis of sexual orientation or gender identity.

“Sexual harassment” means any of three types of misconduct on the basis of sex that occurs in a school district education program or activity and is committed against a person in the United States:

1. *Quid pro quo* harassment by a school district employee (conditioning the provision of an aid, benefit, or service of the school district on an individual's participation in unwelcome sexual conduct);
2. Unwelcome conduct that a reasonable person would find so severe, pervasive, and objectively offensive that it denies a person equal educational access; or
3. Any instance of sexual assault (as defined in the Clery Act, 20 U.S.C. §1092(f)(6)A(v)), dating violence, domestic violence, or stalking (as defined in the Violence Against Women Act, 34 U.S.C. §12291).

If you or someone you know has experienced sexual harassment at school or at any school-related event for *any* reason, you may make a report to have the incident(s) investigated by the District. Any student, parent/guardian, or district employee may complete this form and return it to the building principal or Assistant Title IX Coordinator for the building or program. Alternatively, you may make a verbal or other written report to the building principal or Title IX Assistant Coordinator. Any district employee who receives a completed form or any other written or verbal report will immediately notify the school principal, the Assistant Title IX Coordinator for the building or program, or the District Title IX Coordinator of the report, who will designate the person to investigate and resolve the report pursuant to the District's policies and federal and state laws

The District will not disclose the identity of any individual who makes a report, except to the District personnel designated to investigate the report and as required by policy and law. Retaliation against any individual who makes a report or who participates or assists in an investigation of discrimination or harassment is strictly prohibited.

For more information or questions about making a report, contact the District Title IX Coordinator at titleix@isd742.org or (320) 307-8045.

Please provide as much information as possible. Please continue on additional sheets if necessary.

1. Preliminary Information:

Date of Report: _____

Name of Person Making Report: _____

Phone Number(s): _____ Email Address: _____

2. I am a (check one):

Student - Grade Level/School: _____ Employee –
Position/Site: _____

Parent/Guardian Volunteer Other: _____

3. Report provided to:

Principal/Assistant Principal _____

Assistant Title IX Coordinator for School/Program _____

District Title IX Coordinator: Tracy Flynn Bowe, Executive Director of Human Resources & Labor Relations

Other _____

4. Report Information:

Date/Time of Incident(s): _____

Please provide the name(s) of all persons (including yourself if applicable) who were targets of the harassment:

Please provide the name(s) and/or descriptions of all individuals (students, school employees, school visitors or others) who engaged in or participated in the alleged harassment:

Where did the incident(s) occur: _____

Description of the incident(s): (Attach Additional Pages if Needed)

Please provide the name(s) and/or descriptions of all individuals (students, school employees, school visitors or others) who witnessed the alleged discrimination, harassment or bullying:

If you believe the incident was based on sex, sexual orientation or gender identity, please indicate below which protected class category was the basis of the reported behavior and why you believe this was the basis of the behavior:

Sex. Sexual Orientation Gender Identity

Why:

Is there any additional information that may be of assistance to someone investigating the incident (i.e., Do you ride the same bus? Do you have classes together? Do you have a relationship outside of school or work? Is this happening to someone else?

FOR ADMINISTRATIVE USE ONLY

Process through Formal Complaint Procedure: Yes No

Name of Title IX Complaint Officer _____