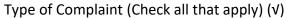


Title IX Discrimination Complaint Form

Title IX of the Education Amendments of 1972 (20 U.S.C. § 1681) is a federal law that prohibits discrimination based on the gender of students and employees of educational institutions which receive federal financial assistance. When the form has been completed and signed by you, and then signed by the Title IX Coordinator or a Deputy, your complaint has been properly received and noted by the District. This document may be given to your supervisor, or hand-delivered or mailed to Barbara Ponder, P.O. Box 1108, Mont Belvieu, TX 77580.

The Title IX Coordinator and/or designee investigate complaints by faculty, staff, and students who believe themselves to be harmed by sexual harassment or discrimination and harassment related to gender.	I am filing this complaint as a: check one: (v)			
	Faculty	□ Staff	Student	
	Name			
	Campus/Department			
	Phone Number			
	Mailing Address			
	Name & Contact of Advisor/Attorney (if applicable)			

Have you brought this matter to the attention of any other department(s) at the District ? If so, please list the name(s) and department(s) of all other persons with whom you have discussed this matter?



- □ Bullying
- □ Cyber bullying
- □ Gender Discrimination
- □ Gender Inequity
- Sexual Harassment
- Sexual Assault
- Sexual Misconduct
- Stalking
- 🗆 Rape
- \square Retaliation
- Relationship Violence

Complaint: Describe your complaint. Please summarize below and attach additional pages describing your complaint if necessary.

Name of person or persons you believe committed the offense against you and how you have contact with them, e.g. supervisor, co-worker, faculty, customer.

Describe the corrective action you are seeking. Attach additional pages if necessary.

For retaliation complaints, please explain why you believe someone retaliated against you:

Witnesses (The relationship information requested means supervisor, student, faculty, etc.)

1.	Relationship	Telephone	
2.	Relationship	Telephone	
3.	Relationship	Telephone	

I certify the aforementioned is true and correct.

Your signature

Complaint received by:

Date