

TITLE IX/SECTION 504 COMPLAINT PROCEDURE

If any person believes that the Brodhead School District or any part of the school organization has inadequately applied the principles and/or regulations of Title IX or Section 504 or has in some way discriminated on the basis of any protected category under state or federal law, he/she may bring forward a complaint by following the procedures below.

INFORMAL COMPLAINT PROCEDURE

The person who believes he/she has a valid basis for a complaint shall first discuss the concern with the building principal or program director, who shall in turn investigate the complaint and reply to the complainant in writing within five (5) working days. If this reply is not acceptable to the complainant, he/she may initiate a formal complaint according to the steps listed.

FORMAL COMPLAINT PROCEDURE

- Step 1. A written statement of the complaint shall be prepared by the complainant and signed. This complaint shall be presented to the office of the Superintendent within five (5) business days of the reply to the informal complaint. The Superintendent will investigate the matters of the complaint. The Superintendent will reply in writing to the complainant within forty-five (45) business days from receipt of complaint.

 - Step 2. If the complainant remains unsatisfied, he/she may file a signed, written appeal of the Superintendent's response in Step 1. In an attempt to resolve the complaint, the school board shall meet with the concerned parties and their representatives within 30 days of the receipt of such an appeal. A copy of the board's disposition of the appeal shall be sent by the board clerk to each concerned party within ninety (90) business days from receipt of complaint.
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Step 3. If, at this point, the complaint has not been satisfactorily settled, further appeal may be made to the Office for Civil Rights (OCR) at:

Chicago Office
Citigroup Center
500 W. Madison Street Suite 1475
Chicago, IL 60661-4544

LEGAL REF.: Title IX, Section 504
PI 9.03 (1) of Wisconsin Administrative Code

Adopted: _____

Last Revision: October 12, 2016

Last Review: October 12, 2016

DISCRIMINATION/HARASSMENT COMPLAINT FORM

Name _____ Date _____

Address _____
(Street) (City) (Zip)

Telephone _____
(Home) (School or work location)

Status of person filing complaint: ___ Student ___ Employee
 ___ Parent ___ Other: _____

Filing complaint-alleging discrimination on the basis of:

Statement of Complaint (include type of discrimination charged and the specific incident(s)
in which it occurred): (attach additional pages as necessary)

Signature of complainant

Date complaint filed

Signature of person receiving complaint

Date Received

Submit all copies to the Superintendent of the School District of Brodhead. He/she will sign and date the complaint. One copy will be returned to the complainant, one copy will be sent to the school or department affected by the complaint, and one copy will be retained by the Superintendent.