

LEGAL STATUS OF THE SCHOOL DISTRICT

Iowa law authorizes the creation of a Common Schools System. As part of this Common Schools System, this school district is a school corporation created and organized under Iowa law. This school district is known as the Clarksville Community School District.

This school corporation is located in Butler County, and its affairs are conducted by elected school officials, the Clarksville Community School District Board of Directors. This school corporation has exclusive jurisdiction over school matters in the territory of the school district.

Legal Reference: Iowa Code §§ 274.1, .2, .6, .7; 278.1(9); 279.8; 594A (1999).

Cross Reference: 200 Legal Status of the Board of Directors

Approved 12/10/01

Reviewed 11/15/21

Revised 08/16/04

## EDUCATIONAL PHILOSOPHY OF THE SCHOOL DISTRICT

As a school corporation of Iowa, the Clarksville Community School District, acting through its board of directors, is dedicated to promoting an equal opportunity for a quality public education to its students. The board's ability may be limited by the school district's ability and willingness to furnish financial support in cooperation with student's parents and school district community. The board is also dedicated to providing the opportunity to develop a healthy social, intellectual, emotional, and physical self-concept in a learning environment that provides guidance to and encourages critical thinking in the students for a lifetime.

The board endeavors, through the dedication of the school district's resources, to encourage students, who come to the school district from a variety of backgrounds, to look forward to the time when they will have jobs, homes, families, places in the school district community, and attain recognition as individuals. In order to achieve this goal, the board will seek qualified employees dedicated to development of their professional skills for the betterment of the education program and for the expertise for educational productivity.

Instruction and curriculum are the key elements of a public education. Critical thinking and problem solving skills that will assist the students' preparation for life is instructed as part of a sequentially coordinated curriculum. The school district strives to prepare students for employment, to discover and nurture creative talent and to prepare them to meet and cope with social change in an atmosphere conducive to learning.

The support and involvement of the home and the school district community are essential to achieve educational excellence in the school district. The school district strives to maintain an active relationship with the home and the school district community to create within the students an awareness of dignity and worth of the individual, civic responsibility and respect for authority.

Legal Reference: Iowa Code §§ 256.11, .11A (2003).

Cross Reference: 102 Equal Educational Opportunity  
103 Long-Range Needs Assessment  
209 Board of Directors' Management Procedures  
600 Goals and Objectives of the Education Program  
602 Curriculum Development

Approved 05/13/91

Reviewed 11/15/21

Revised 08/16/04

## EQUAL EDUCATIONAL OPPORTUNITY

It is the goal of the board to develop a healthy social, intellectual, emotional, and physical self-concept in the students enrolled in the school district. Each student attending school will have the opportunity to use its education program and services as a means for self-improvement and individual growth. In so doing, the students are expected to conduct themselves in a manner that assures each student the same educational opportunity.

The Clarksville Community School District does not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. The belief in equal educational opportunity serves as a guide for the board and employees in making decisions relating to school district facilities, employment, selection of educational materials, equipment, curriculum, and regulations affecting students. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact: Superintendent, 318 N Mather, Clarksville, IA 50619, 319-278-4008.

Board policies, rules and regulations affect students while they are on school district property or on property within the jurisdiction of the school district; while on school owned and/or operated school or chartered vehicles; while attending or engaged in school activities; and while away from school grounds if misconduct will directly affect the good order, efficient management and welfare of the school district.

The board requires all persons, agencies, vendors, contractors and other persons and organizations doing business with or performing services for the school district to subscribe to all applicable federal and state laws, executive orders, rules and regulations pertaining to contract compliance and equal opportunity.

Inquiries by students regarding compliance with equal educational opportunity and affirmative action laws and policies, including but not limited to complaints of discrimination, are directed to the Affirmative Action Coordinator by writing to the Affirmative Action Coordinator, Clarksville Community School District, Clarksville, Iowa 50619; or by telephoning 319-278-4008.

Inquiries by students regarding compliance with equal educational opportunity and affirmative action laws and policies, including but not limited to complaints of discrimination, may also be directed in writing to the Director of the Region VII office of Civil Rights, U.S. Department of Education, John C. Kluczynski Federal Building, 230 S. Dearborn St., 37<sup>th</sup> Floor, Chicago, IL, 60604 (312) 730-1560, fax (312) 730-1576 [OCR.Chicago@ed.gov](mailto:OCR.Chicago@ed.gov), the Iowa Civil Rights Commissioner, <https://icrc.iowa.gov>, (515) 281-4121 or the Iowa Dept. of Education, Grimes State Office Bldg., Des Moines, IA 50319. (515) 281-5294. This inquiry or complaint to the federal or state office may be done instead of, or in addition to, an inquiry or complaint at the local level.

## GRIEVANCE PROCEDURE

It is the policy of the Clarksville Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact Mark Olmstead, Superintendent, 318 N Mather, Clarksville, IA 50619, 319-278-4008, molmstead@clarksville.k12.ia.us.

Students, parents of students, employees, and applicants for employment in the school district have the right to file a formal complaint alleging discrimination. The district has policies and procedures in place to identify and investigate complaints alleging discrimination. If appropriate, the district will take steps to prevent the recurrence of discrimination and to correct its discriminatory effects on the Complainant and others.

A Complainant may attempt to resolve the problem informally by discussing the matter with a building principal or a direct supervisor. However, the Complainant has the right to end the informal process at any time and pursue the formal grievance procedures outlined below. Use of the informal or formal grievance procedure is not a prerequisite to the pursuit of other remedies. Please note that informal processes and procedures are not to be used in certain circumstances (e.g., sexual harassment and sexual assault).

### **Filing a Complaint**

A Complainant who wishes to avail himself/herself of this grievance procedure may do so by filing a complaint with the equity coordinator(s). An alternate will be designated in the event it is claimed that the equity coordinator or superintendent committed the alleged discrimination or some other conflict of interest exists. Complaints shall be filed within 180 of the event giving rise to the complaint or from the date the Complainant could reasonably become aware of such occurrence. The Complainant will state the nature of the complaint and the remedy requested. The equity coordinator(s) shall assist the Complainant as needed.

### **Investigation**

Within 15 working days, the equity coordinator will begin the investigation of the complaint or appoint a qualified person to undertake the investigation (hereinafter "equity coordinator"). If the Complainant is under 18 years of age, the equity coordinator shall notify his or her parent(s)/guardian(s) that they may attend investigatory meetings in which the Complainant is involved. The complaint and identity of the Complainant, Respondent, or witnesses will only be disclosed as reasonably necessary in connection with the investigation or as required by law or policy. The investigation may include, but is not limited to the following:

- A request for the Complainant to provide a written statement regarding the nature of the complaint;
- A request for the individual named in the complaint to provide a written statement;
- A request for witnesses identified during the course of the investigation to provide a written statement;
- Interviews of the Complainant, Respondent, or witnesses;
- An opportunity to present witnesses or other relevant information; and
- Review and collection of documentation or information deemed relevant to the investigation.

Within 60 working days, the equity coordinator shall complete the investigation and issue a report with respect to the findings.

The equity coordinator shall notify the Complainant and Respondent of the decision within 5 working days of completing the written report. Notification shall be by U.S. mail, first class.

**Decision and Appeal**

The complaint is closed after the equity coordinator has issued the report, unless 10 working days after receiving the decision, either party appeals the decision to the superintendent by making a written request detailing why he/she believes the decision should be reconsidered. The equity coordinator shall promptly forward all materials relative to the complaint and appeal to the superintendent. Within 30 working days, the superintendent shall affirm, reverse, amend the decision, or direct the equity coordinator to gather additional information. The superintendent shall notify the Complainant, Respondent, and the equity coordinator of the decision within 5 working days of the decision. Notification shall be by U.S. mail, first class.

The decision of the superintendent shall be final.

The decision of the superintendent in no way prejudices a party from seeking redress through state or federal agencies as provided by in law.

This policy and procedures are to be used for complaints of discrimination, in lieu of any other general complaint policies or procedures that may be available.

If any of the stated timeframes cannot be met by the district, the district will notify the parties and pursue completion as promptly as possible.

Retaliation against any person, because the person has filed a complaint or assisted or participated in an investigation, is prohibited. Persons found to have engaged in retaliation shall be subject to discipline by appropriate measures.

ANNUAL NOTICE OF NONDISCRIMINATION

The Clarksville Community School District offers career and technical programs in the following areas of study: Business, Health Science, Industrial Technology and Marketing.

It is the policy of the Clarksville Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact Mark Olmstead, Superintendent, 318 N Mather, Clarksville, IA 50619, 319-278-4008, [molmstead@clarksville.k12.ia.us](mailto:molmstead@clarksville.k12.ia.us).

Approved 08/16/04

Reviewed 11/15/11

Revised 11/15/2021

CONTINUOUS NOTICE OF NONDISCRIMINATION

It is the policy of the Clarksville Community School District not to discriminate on the basis of race, color, national origin, sex, disability, religion, creed, age (for employment), marital status (for programs), sexual orientation, gender identity and socioeconomic status (for programs) in its educational programs and its employment practices. There is a grievance procedure for processing complaints of discrimination. If you have questions or a grievance related to this policy please contact Mark Olmstead, Superintendent, Clarksville Community School District 318 N Mather, Clarksville, IA 50619, 319-278-4008, [molmstead@clarksville.k12.i.a.us](mailto:molmstead@clarksville.k12.i.a.us).

Approved 08/16/04

Reviewed 11/15/11

Revised 11/15/2021

SECTION 504 STUDENT AND PARENTAL RIGHTS

The Clarksville Community School District does not discriminate in its educational programs and activities on the basis of a student's disability. It has been determined that your child has a qualifying disability for which accommodations may need to be made to meet his or her individual needs as adequately as the needs of other students. As a parent, you have the right to the following:

- participation of your child in school district programs and activities, including extracurricular programs and activities, to the maximum extent appropriate, free of discrimination based upon the student's disability and at the same level as students without disabilities;
- receipt of free educational services to the extent they are provided students without disabilities;
- receipt of information about your child and your child's educational programs and activities in your native language;
- notice of identification of your child as having a qualifying disability for which accommodations may need to be made and notice prior to evaluation and placement of your child and right to periodically request a re-evaluation of your child;
- inspect and review your child's educational records including a right to copy those records for a reasonable fee; you also have a right to ask the school district to amend your child's educational records if you feel the information in the records is misleading or inaccurate; should the school district refuse to amend the records, you have a right to a hearing and to place an explanatory letter in your child's file explaining why you feel the records are misleading or inaccurate;
- hearing before an impartial hearing officer if you disagree with your child's evaluation or placement; you have a right to counsel at the hearing and have the decision of the impartial hearing officer reviewed.

Inquiries concerning the school district's compliance with the regulations implementing Title VI, Title IX, the Americans with Disabilities Act (ADA), § 504 or Iowa Code § 280.3 should be directed to:

(Title) Superintendent

(Where located) 318 N. Mather St., Clarksville, Iowa 50619 (Telephone No.) 319-278-4008

who has been designated by the school district to coordinate the school district's efforts to comply with the regulations implementing Title VI, Title IX, the ADA, § 504 and Iowa Code 280.3. (2003)

Approved 08/16/04

Reviewed 11/15/2021

Revised \_\_\_\_\_



**COMPLAINT FORM**  
(Discrimination, Anti-Bullying, and Anti-Harassment)

Date of complaint: \_\_\_\_\_

Name of Complainant: \_\_\_\_\_

Are you filling out this form for yourself or someone else (please identify the individual if you are submitting on behalf of someone else):  
 \_\_\_\_\_  
 \_\_\_\_\_

Who or what entity do you believe discriminated against, harassed, or bullied you (or someone else)?  
 \_\_\_\_\_

Date and place of alleged incident(s):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Names of any witnesses (if any): \_\_\_\_\_

Nature of discrimination, harassment, or bullying alleged (check all that apply):

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color		
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed		

In the space below, please describe what happened and why you believe that you or someone else has been discriminated against, harassed, or bullied. Please be as specific as possible and attach additional pages if necessary.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## WITNESS DISCLOSURE FORM

Name of Witness: \_\_\_\_\_

Date of interview: \_\_\_\_\_

Date of initial complaint: \_\_\_\_\_

Name of Complainant (include whether the Complainant is a student or employee):  
\_\_\_\_\_  
\_\_\_\_\_Date and place of alleged incident(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nature of discrimination, harassment, or bullying alleged (check all that apply):

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color	<input type="checkbox"/>	
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed	<input type="checkbox"/>	

Description of incident witnessed:

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Additional information:

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I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved 11/15/2021 Reviewed \_\_\_\_\_ Revised \_\_\_\_\_

DISPOSITION OF COMPLAINT FORM

Date: \_\_\_\_\_

Date of initial complaint: \_\_\_\_\_

Name of Complainant (include whether the Complainant is a student or employee):  
 \_\_\_\_\_  
 \_\_\_\_\_

Date and place of alleged incident(s):  
 \_\_\_\_\_  
 \_\_\_\_\_

Name of Respondent (include whether the Respondent is a student or employee):  
 \_\_\_\_\_  
 \_\_\_\_\_

Nature of discrimination, harassment, or bullying alleged (check all that apply):

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color		
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed		

Summary of Investigation:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved 11/15/2021 Reviewed \_\_\_\_\_ Revised \_\_\_\_\_

LONG-RANGE NEEDS ASSESSMENT

Long-range\_needs assessment enables the school district to analyze assessment data, get feedback from the community about its expectations of students and determines how well students are meeting student learning goals. The board shall conduct ongoing and in-depth needs assessment, soliciting information from business, labor, industry, higher education and community members, regarding their expectations for adequate student preparation as responsible citizens and successful wage earners.

In conjunction with the in-depth needs assessment of the school district, the board shall authorize the appointment of a committee, representing administrators, employees, parents, students and community members, to make recommendations and assist the board in determining the priorities of the school district in addition to the basic skills areas of the education program.

In addition, the school district will provide ongoing opportunities for local feedback through the use of formal and informal activities.

It shall be the responsibility of the superintendent to ensure the school district community is informed of students' progress on state and locally determined indicators. The superintendent shall report annually to the board about the means used to keep the community informed.

As a result of the board and committee's work, the board shall determine major educational needs and rank them in priority order; develop long-range goals and plans to meet the needs; establish and implement short-range and intermediate-range plans to meet the goals and to attain the desired levels of student performance; evaluate progress toward meeting the goals and maintain a record of progress under the plan that includes reports of student performance and results of school improvement projects; and annually report the school district's progress made under the plan to the committee, community and Iowa Department of Education.

Legal Reference: Iowa Code §§ 21; 256.7; 280.12, .18 (1997).  
281 I.A.C. 12.8(1)(b).

Cross Reference: 101 Educational Mission of the School District  
200 Legal Status of the Board of Directors  
208 Committees of the Board of Directors  
603.1 Basic Instruction Program  
801.2 Buildings and Sites Surveys

Approved 1/8/01

Reviewed 11/15/2021

Revised 08/16/04

## LONG-RANGE NEEDS ASSESSMENT

The Clarksville Community School District will use formal and informal activities to conduct long-range needs assessment. While from time to time such activities may be more focused and concerted, the long-range needs assessment is an on-going process.

The district will make provisions for collecting, analyzing, and reporting information derived from local, state, and national sources. Such sources of information may include, but are not limited to:

- Iowa Assessments
- Measures of Academic Progress (MAP)
- American College Testing (ACT) program
- Armed Services Vocational Aptitude Battery (ASVAB)
- Formative Assessment System for Teachers (FAST)
- Local reading fluency and mathematics probes
- Graduation, dropout, and attendance rate
- Postsecondary intentions surveys and completion rates
- Student, parent, staff, and community surveys

The district will make provisions for reviewing information derived from local, state and national sources with emphasis placed upon, but not limited to, the following considerations:

- State indicators and other locally determined indicators
- Locally established learning goals, both long-range goals and annual goals
- Specific data collection required by state and federal programs

The district will make provisions for collecting and analyzing assessment data based upon, but not limited to the following factors:

- State and national indicators
- Locally determined indicators
- Locally established student learning goals, both long-range goals and annual goals

The district will make provisions to report information derived from local, state, and national sources through a variety of communication opportunities, which may include, but are not limited to, the following:

- Parent-Teacher conferences
- District, building, and classroom newsletter
- School Improvement Advisory Committee
- School Board meetings and minutes
- Local newspaper and other media sources
- District and employee websites
- Parent Teacher Organization (PTO)
- Other district and community committees and organizations, formal and informal

## ANTI-BULLYING/ANTI-HARASSMENT POLICY

The Clarksville Community School District is committed to providing all students, employees, and volunteers with a safe and civil school environment in which all members of the school community are treated with dignity and respect. Bullying and/or harassing behavior can seriously disrupt the ability of school employees to maintain a safe and civil environment, and the ability of students to learn and succeed.

Bullying and/or harassment of or by students, employees, and volunteers is against federal, state, and local policy and is not tolerated by the board.

Accordingly, school employees, volunteers, and students shall not engage in bullying or harassing behavior while on school property, while on school-owned or school-operated vehicles, while attending or participating in school-sponsored or sanctioned activities, and while away from school grounds if the conduct materially interferes with the orderly operation of the educational environment or is likely to do so.

Complaints may be filed with the superintendent or superintendent's designee pursuant to the regulation accompanying this policy. Complaints will be investigated within a reasonable time frame.

A school employee, volunteer, or student, or a student's parent or guardian who promptly, reasonably, and in good faith reports an incident of bullying or harassment, in compliance with the procedures in the regulation, to the appropriate school official designated by the school district, shall be immune from civil or criminal liability relating to such report and to participation in any administrative or judicial proceeding resulting from or relating to the report.

### Retaliation Prohibited

Individuals who knowingly file false bullying or harassment complaints and any person who gives false statements in an investigation may be subject to discipline by appropriate measures.

Any student found to have violated or retaliated in violation of this policy shall be subject to measures up to, and including, suspension and expulsion. Any school employee found to have violated or retaliated in violation of this policy shall be subject to measures up to, and including, termination of employment. Any school volunteer found to have violated or retaliated in violation of this policy shall be subject to measures up to, and including, removal from service and exclusion from school grounds.

### Definitions

For the purposes of this policy, the defined words shall have the following meaning:

- "Electronic" means any communication involving the transmission of information by wire, radio, optic cable, electromagnetic, or other similar means. "Electronic" includes but is not limited to communication via electronic mail, internet-based communications, pager service, cell phones, and electronic text messaging. "Harassment" and "bullying" mean any repeated or potentially repeated electronic, written, verbal, or physical act or other ongoing conduct toward an individual based on any trait or characteristic of the individual which creates an objectively hostile school environment that meets one or more of the following conditions:
  - (1) Places the individual in reasonable fear of harm to the individual's person or property.
  - (2) Has a substantial detrimental effect on the individual's physical or mental health.

- (3) Has the effect of substantially interfering with the individual's academic or career performance. Has the effect of substantially interfering with the individual's ability to participate in or benefit from the services, activities, or privileges provided by a school.
- "Trait or characteristic of the individual" includes but is not limited to age, color, creed, national origin, race, religion, marital status, sex, sexual orientation, gender identity, physical attributes, physical or mental ability or disability, ancestry, political party preference, political belief, socioeconomic status, or familial status.
  - "Volunteer" means an individual who has regular, significant contact with students.

**Publication of Policy**

The board will annually publish this policy. The policy may be publicized by the following means:

- Inclusion in the student handbook,
- Inclusion in the employee handbook
- Inclusion in the registration materials
- Inclusion on the school or school district's web site,

(other) \_\_\_\_\_

ANTI-BULLYING/ANTI-HARASSMENT INVESTIGATION PROCEDURES

**Filing a Complaint**

An individual who believes that the individual has been harassed or bullied may file a complaint with the superintendent or superintendent's designee. The complaint form is available [link to form on website or designate location such as building office]. An alternate investigator will be designated in the event it is claimed that the superintendent or superintendent's designee committed the alleged bullying or harassment or some other conflict of interest exists. Complaints shall be filed within *[state number of days - 180]* of the event giving rise to the complaint or from the date the Complainant could reasonably become aware of such occurrence. The Complainant will state the nature of the complaint and the remedy requested. The Complainant shall receive assistance as needed.

**Investigation**

The school district will promptly and reasonably investigate allegations of bullying or harassment upon receipt of a written complaint. The Superintendent (hereinafter "Investigator") will be responsible for handling all complaints alleging bullying or harassment.

The investigation may include, but is not limited to the following:

- Interviews with the Complainant and the individual named in the complaint ("Respondent")
- A request for the Complainant to provide a written statement regarding the nature of the complaint;
- A request for the Respondent to provide a written statement;
- Interviews with witnesses identified during the course of the investigation;
- A request for witnesses identified during the course of the investigation to provide a written statement; and
- Review and collection of documentation or information deemed relevant to the investigation.

The Investigator shall consider the totality of circumstances presented in determining whether conduct objectively constitutes bullying or harassment as defined in Board policy. Upon completion of the investigation, the Investigator shall issue a report with respect to the findings, and provide a copy of the report to the appropriate building principal or Superintendent if the investigation involved the building principal

The complaint and identity of the Complainant, Respondent, or witnesses will only be disclosed as reasonably necessary in connection with the investigation or as required by law or policy. Similarly, evidence uncovered in the investigation shall be kept confidential to the extent reasonably possible.



**Decision**

The investigator, building principal or superintendent, depending on the individuals involved, shall inform the Complainant and the accused about the outcome of the investigation. If, after an investigation, a student is found to be in violation of the policy, the student shall be disciplined by appropriate measures, which may include suspension and expulsion. If after an investigation a school employee is found to be in violation of this policy, the employee shall be disciplined by appropriate measures, which may include termination. If after an investigation a school volunteer is found to be in violation of this policy, the volunteer shall be subject to appropriate measures, which may include exclusion from school grounds.

Individuals who knowingly file false bullying and/or harassment complaints and any person who gives false statements in an investigation may be subject to discipline by appropriate measures, as shall any person who is found to have retaliated against another in violation of this policy. Any student found to have retaliated in violation of this policy shall be subject to measures up to, and including, suspension and expulsion. Any school employee found to have retaliated in violation of this policy shall be subject to measures up to, and including, termination of employment. Any school volunteer found to have retaliated in violation of this policy shall be subject to measures up to, and including, exclusion from school grounds.

ANTI-BULLYING/HARASSMENT COMPLAINT FORM

Name of complainant: \_\_\_\_\_

Position of complainant: \_\_\_\_\_

Name of student or employee target: \_\_\_\_\_

Date of complaint: \_\_\_\_\_

Name of alleged harasser or bully: \_\_\_\_\_

Date and place of incident or incidents: \_\_\_\_\_

\_\_\_\_\_

Nature of Discrimination or Harassment Alleged (Check all that apply)

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color		
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed		

Description of misconduct: \_\_\_\_\_

\_\_\_\_\_

Name of witnesses (if any): \_\_\_\_\_

\_\_\_\_\_

Evidence of harassment or bullying, i.e., letters, photos, etc. (attach evidence if possible):

\_\_\_\_\_

Any other information: \_\_\_\_\_

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

WITNESS DISCLOSURE FORM

Name of Witness: \_\_\_\_\_

Date of interview: \_\_\_\_\_

Date of initial complaint: \_\_\_\_\_

Name of Complainant (include whether the Complainant is a student or employee):  
\_\_\_\_\_  
\_\_\_\_\_

Date and place of alleged incident(s):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nature of discrimination, harassment, or bullying alleged (check all that apply):

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color		
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed		

Description of incident witnessed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DISPOSITION OF ANTI-BULLYING/HARASSMENT COMPLAINT FORM

Name of complainant: \_\_\_\_\_

Name of student or employee target:: \_\_\_\_\_

Grade and building of student or employee: \_\_\_\_\_

Name and position or grade of alleged perpetrator /respondent: \_\_\_\_\_  
\_\_\_\_\_

Date of initial complaint: \_\_\_\_\_

Nature of discrimination or harassment alleged (Check all that apply)

<input type="checkbox"/>	Age	<input type="checkbox"/>	Physical Attribute	<input type="checkbox"/>	Sex
<input type="checkbox"/>	Disability	<input type="checkbox"/>	Physical/Mental Ability	<input type="checkbox"/>	Sexual Orientation
<input type="checkbox"/>	Familial Status	<input type="checkbox"/>	Political Belief	<input type="checkbox"/>	Socio-economic Background
<input type="checkbox"/>	Gender Identity	<input type="checkbox"/>	Political Party Preference	<input type="checkbox"/>	Other – Please Specify:
<input type="checkbox"/>	Marital Status	<input type="checkbox"/>	Race/Color		
<input type="checkbox"/>	National Origin/Ethnic Background/Ancestry	<input type="checkbox"/>	Religion/Creed		

Summary of investigation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_