FORM 22 – Discrimination / Harassment Complaint

Purpose: This form allows a student or family to report discrimination, harassment, inequitable treatment, or exclusion based on gender, disability, race, religion, culture, or any other protected category — **including sports-related access or playing time that appears biased.**

Why this is required: Federal and state civil rights laws require schools to provide a **safe reporting channel** for discrimination and harassment in athletics, not just in the classroom. This protects students and ensures concerns are reviewed by an administrator rather than only a coach.

Student Name (or "confidential"): _____ **Activity/Sport:** _____
Person(s) involved (if known): _____

Type of Concern (check all that apply)

☐ Unequal treatment / fairness concern
☐ Gender equity (Title IX)
☐ Disability/medical-related exclusion (ADA/504)
☐ Religious or cultural exclusion
☐ Retaliation concern
☐ Harassment / bullying / intimidation
☐ Other:

Brief Description

_____

_____

Safety (optional but helpful)

☐ I feel safe continuing on the team/program
☐ I feel uncomfortable but not unsafe
☐ I do not feel safe without changes
☐ I want follow-up before I continue

Preference for Follow-Up

☐ Email
☐ Phone
☐ In-person meeting
☐ Student only
☐ Parent involved
☐ Anonymous follow-up (if possible)

Submitted by:

☐ Student
☐ Parent/Guardian
☐ Staff
☐ Anonymous

Date submitted: _____

RETALIATION PROTECTION (required statement)

It is illegal for any coach, staff member, or student to punish or treat a student differently because they filed this report or raised a concern. If retaliation occurs, it must be reported immediately and will be treated as a new violation.

District Use Only (completed by Administrator)

Initial review date: _____ Assigned to: _____

Action taken:

☐ Follow-up meeting scheduled
☐ Safety plan issued (if needed)
☐ Investigation initiated
☐ Informal resolution
☐ Referred to Title IX / Civil Rights investigation
☐ No action (must include written rationale)

Administrator notes:

Administrator Signature: _____ Date: _____