

Cumberland Valley School District

DISCRIMINATION COMPLAINT FORM – ELEMENTARY STUDENT

Compliance Officer:

Michelle Zettlemoyer **Director of Human Resources** (717) 506-3339 or mzettlemoyer@cvschools.org

Office Location:

Cumberland Valley School District - District Office

Mailing Address:

1.

6746 Carlisle Pike Mechanicsburg, PA 17050

If you have experienced or witnessed discrimination or sexual harassment, please report the incident by completing this form. This completed form can be given to any school staff member, your Principal or to the district's Compliance Officer who is listed above. If you are unable to complete this form, please call the number provided and someone will meet with you.

If you decide to use this form, please type or print all information and use additional pages if more space is needed. An online version of this form, which can be attached and sent via email, can be found at: http://www.cvschools.org/support operations/human resources/non- discrimination information.

Before completing this form please review Policies #103, 103.1, 103.2, 104, and 824, which can be found at https://www.boarddocs.com/pa/cmdvsd/Board.nsf/Public?open&id=policies.

Provide your name and contact information: Last Name: _____ First Name: ____ Middle Name: ____ Address: ______ City:_____ Zip Code:_____ Telephone:_____ E-mail Address:

Anonymous Complaint – Check this box if you do not wish to give us your name. Please note that the District may not be able to investigate or follow up with you about your complaint if you decide not to give us your name and contact information.

2.	Provide the name of the person who was discriminated against (if it wasn't you). If you don't know the person please describe them
Nam	ne (s):
Buile	ding:
Grad	de (if students)
 Descr	iption of person (if you don't know the person):
3.	Provide the name of the person who discriminated against the person in #2. If you don't know the person, please describe them.
	ne (s):
Buil	ding:
Grad	de (if students)
<u>Descr</u>	ription of person (if you don't know the person):
4.	Please describe what happened, where it happened and when it happened.

5. against	What is the most recent date you were discriminated against or witnessed someone else be discriminated st?				
Date:_					
6.	Provide the contact information of your parent or legal guardian. This information is not required, but it will be helpful to us.				
Last Na	me:	First Name:	Middle Name:		
Address	s:				
			Zip Code:		
Telepho	one:				
7.	What would you like to				
8.	We cannot accept you	r complaint if it has not	been signed. Please sign a	nd date your complaint below.	
Date		Si	gnature of person in Item 2		

CONSENT FORM - FOR REVEALING NAME AND PERSONAL INFORMATION TO OTHERS

(Please print or type except for signature line)

Your Name: Name of Person (s) or Building That You Have File	ed This Complaint Against:
 For example, to decide whether a building needs to reveal that person's name and oth verify facts or get additional information. Wall forms of retaliation against that person and the second se	discriminated against a person, Cumberland Valley often her personal information to employees at that school to When that occurs, the District informs the employees that and other individuals associated with the person are yeal the person's name and personal information during
the District may decide to close your comp	eal your name or personal information as described above, laint if it is determined it is necessary to disclose your name whether the person (s) or school discriminated against
Please sign section A or section B (but not both) ar	nd return to Cumberland Valley School District:
 If you filed the complaint on behalf of yourself, If you filed the complaint on behalf of another states 	you should sign this form. specific person, that other person should sign this form.
EXCEPTION : If the complaint was filed on behalf of a legally incompetent adult, this form must be signed	a specific person who is younger than 18 years old or ed by the parent or legal guardian of that person.
• If you filed the complaint on behalf of a class of sign the form.	of people, rather than any specific person, you should
	onsent to reveal my identity (and that of my minor filed) to others to further OCR's investigation and
Signature	 Date
B. I do not give Cumberland Valley School Distriction my minor child/ward on whose behalf the concumberland Valley may have to close my compared to the concumber of the concumb	omplaint is filed) to others. I understand that
 Signature	 Date