



Dublin City School District

## Title VI/VII/IX Internal Complaint Form

Program  
2260 F2  
Revised 9/20/11  
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\_\_\_\_\_  
Name of complainant

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Address

Relationship to the School District:

\_\_\_\_\_ Student

\_\_\_\_\_ Employee

\_\_\_\_\_ Teacher

\_\_\_\_\_ Other \_\_\_\_\_ (Position)

\_\_\_\_\_ Other \_\_\_\_\_ (Describe)

Statement/nature of complaint (including date of alleged discrimination):

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

What action are you requesting (i.e. relief sought)?

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

\_\_\_\_\_  
Complainant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date received by  
District's Civil Rights  
Coordinator

Internal Complaint – Step 1  
Investigation/Conference with Civil Rights Coordinator

A conference was held on \_\_\_\_\_, at \_\_\_\_\_ and matters pertaining to  
(date) (time)  
the following alleged complaint were discussed.

Brief description of alleged complaint:

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Disposition of alleged complaint:

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\_\_\_\_\_  
District's Civil Rights Coordinator's signature

\_\_\_\_\_  
Date

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If you wish to appeal this decision to the Superintendent, sign below and deliver to the Superintendent's office within five (5) school days of receipt of the Civil Rights Coordinator's decision.

\_\_\_\_\_  
Complainant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date received by  
District's Civil Rights  
Coordinator

Internal Complaint – Step 2  
Appeal to Superintendent

Date received by Superintendent's office: \_\_\_\_\_

Date of conference: \_\_\_\_\_

Disposition of alleged complaint:

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\_\_\_\_\_  
Superintendent's signature

\_\_\_\_\_  
Date

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If you wish to appeal this decision to the Board of Education, sign below and deliver to the Treasurer's office within five (5) school days of receipt of the Superintendent's decision.

\_\_\_\_\_  
Complainant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date received by  
District's Civil Rights  
Coordinator

Internal Complaint – Step 3  
Appeal to Board of Education

Date received by Board of Education (i.e. in Treasurer's office): \_\_\_\_\_

Date of meeting with Board: \_\_\_\_\_

Disposition of alleged complaint:

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\_\_\_\_\_  
President, Board of Education's signature

\_\_\_\_\_  
Date