COMPLAINT FORM

The district does not permit discrimination on the basis of a person’s actual or perceived characteristics such as, but not limited to, race, color, sex, sexual orientation, gender identity, gender expression, religion, creed, national origin, ancestry, immigration/citizenship status, age, marital status, conditions related to pregnancy or childbirth, genetic information, mental or physical disability, need for special education services, or any other protected class in conformance with federal, state, and local law in any of its programs or activities. If you believe that unlawful discrimination or harassment has occurred in violation of Board Policy, please complete, sign, and submit this form to the appropriate district compliance officer, Thompson R2-J School District, 800 South Taft Avenue, Loveland, Colorado, 80537, 970-613-5000.

Date:

Complainant:

Name of Student (if applicable):

Address:  Phone:

1. Describe the alleged violation in specific terms. Include: (a) the specific incident or activity that is viewed as unlawful discrimination or harassment; (b) the individual(s) involved; (c) the dates, times, and locations of the incident or activity; (d) names of witness(es); and (e) why you believe the incident constitutes a violation of Board Policy AC.

2. Describe any relevant communication that has already occurred to address the issue. Please specify the type of communication, dates of communication, and names of individuals involved (attach additional pages if needed).

3. Please describe how you would propose to resolve this issue (attach additional pages if needed).

Complainant’s Signature

Adopted November 14, 2012
Revised July 29, 2020

Thompson School District R2J, Loveland, Colorado