Title IX Sexual Harassment Policy and Grievance Process Form

Title IX Complaint Form

Submit to: Erica MacNeil

Title IXCoordinator 186A S Main Street Newmarket, NH 03857

macneile@newmarket.k12.nh.

Complainant's name:	Date:
Address:	
Telephone Contact:	
Name of Student on whose behalf the complaint is filed, if applicable:	
Student's Grade:	
Description of facts alleging sexual harassment, identi- harassment:	ifying who you allege to have engaged in sexual
If you require additional space for your description, pl sign it.	ease attach your narrative to this complaint and
Please attach any supporting documents or information	on which relate to your description above.
I would like to speak with the Title IX Coordinator furth district to conduct an investigation: Yes	er before I decide whether I want the school No
Please list any individuals who have information regar	rding your complaint:

Complainant's Signature:
Upon receipt of a signed complaint requesting an investigation, SAU 31 will commence a Title IX Investigation pursuant to the applicable laws, regulations and SAU's Title IX Policy. In accordance with Title IX, SAU 31 offers prompt supportive measures to individuals alleging potential violations of Title IX, even if a formal complaint is not filed.
A copy of the School District's Title IX policy is available at www.newmarket.k12.nh.us