

Title IX Complaint Form

Instructions:

Please complete this form to file a complaint under Title IX. Provide as much detail as possible. Your privacy and confidentiality will be respected throughout the investigation process.

Full Name:
Contact Information (phone, email):
Relationship to the Institution (e.g. student, faculty staff):

Incident Information:

Complainant Information:

Date(s) of Incident(s):

Time of Incident(s):

Location(s) of Incident(s):

Nature of the Complaint:

Describe the alleged violation(s) of Title IX. Include details such as actions, behaviors, or circumstances surrounding the incident(s).

Respondent Information:
Provide information about the person(s) involved in the alleged violation, if known.
Full Name:
Relationship to the Institution (if any):
Contact Information (if known):
Witness Information:
If there were any witnesses to the incident(s), please provide their names and contact
information.
Supporting Documentation:
Attach any relevant documents, emails, texts, or other materials that support your complaint.
Statement of Consent:
By submitting this complaint, I affirm that the information provided is accurate to the best of my
knowledge. I understand that the institution will investigate the matter in accordance with Title
IX policies.
Signature:
Date:

Submission Instructions:

Please save the completed form to your device and send as an email attachment to stephanie.livingston@coloradoearlycolleges.org. Your complaint will be handled with confidentiality to the extent permitted by law.