

The RSU 16 Commitment during the Complaint Investigation Process.....

RSU 16 is committed to providing a work environment that is supportive and comfortable for you to discuss your concerns regarding individual treatment in the workplace, equal employment opportunity and diversity. Every effort will be made to ensure the fair and equal treatment of all involved parties during the complaint investigation process.

During the complaint investigation process, and in accordance with existing policies and laws, RSU 16 will make every reasonable effort to protect the privacy of all parties involved in the investigation, and to keep the information confidential to the extent required by law. However, RSU 16 cannot guarantee that all information will remain confidential.

Complaints should be filed no more than one year from the date of the alleged incident(s). If you decide to file a complaint, the Affirmative Action/Title IX Officer will:

- Walk you through the complaint process
- Ask you to provide a signed, written statement about the incident(s)
- Provide an opportunity for you to identify witnesses or individuals who will support your claim
- Investigate your complaint
- Keep you informed of the progress of the investigation
- Advise you of the outcome of the investigation
- Direct the findings of the investigation to appropriate RSU 16 personnel for review and appropriate action

RSU 16 prohibits retaliation against individuals who file complaints or participate in the complaint investigation process. The Affirmative Action and Title IX Officer will investigate retaliation complaints and report the findings to appropriate RSU 16 personnel for review and applicable action. If you feel that you have been retaliated against for filing a complaint of discrimination or otherwise participating in a discrimination or harassment-related complaint investigation process, please contact the RSU 16 Affirmative Action Officer/Title IX Officer at (207) 998-2727x113.

**RSU 16 Staff Affirmative Action Office &
Title IX Discrimination Complaint Form**

(207) 998-2727
3 Aggregate Road
Poland, ME 04274

To file a complaint with RSU 16, please complete and bring this form in person to the Affirmative Action & Title IX Officer or call the office to make arrangements for the Officer to meet with you at another location. If you are unable for any reason to complete this form and would like to make a verbal complaint, please call 998-2727x113 or contact jhawley@rsu16.org to leave a message. Although the RSU 16 cannot commit to keeping a Title IX discrimination complaint confidential because of the RSU 16's obligation to investigate the complaint, the RSU 16 will use its best efforts not to disseminate information concerning the complaint beyond those who have a need to know. Please feel free to contact our office if you have any questions regarding the process for filing or investigating complaints of discrimination (including sexual harassment).

RSU 16's Non-Disclosure Statement

In compliance with Title IX of the Education Amendments of 1972, Title VI and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and other federal, state, and local laws, Regional School Unit 16 does not discriminate on the basis of race, color, religion, age, sex, sexual orientation, gender identity, national or ethnic origin, disability, or veteran status in employment processes, admission or financial aid programs, or educational programs or activities. The Director of Operations, John Hawley, is the individual designated by RSU 16 to coordinate its efforts to comply with Title IX, Section 504 and other equal opportunity and affirmative action regulations and laws.

INSTRUCTIONS FOR COMPLETING THE PDF FORM:

Print the form. Upon completion of the form, sign it and mail or email it to the address listed on the last page. "Today's Date" refers to the date that you complete the form.

FILING A DISCRIMINATION COMPLAINT

It is the policy of RSU 16 not to engage in discrimination or harassment of any person employed by or seeking employment with RSU 16 on the basis of race, color, religion, age, sex, sexual orientation, gender identity, national or ethnic origin, disability, or veteran status in employment processes, admission or financial aid programs, or educational programs or activities. If you feel that you have been subjected to discrimination or harassment by your supervisor, co-worker(s), or anyone in the workplace, based on any of the above protected bases, please complete the following form and email, mail, or fax it to the Affirmative Action Officer (see the contact info below). Your complaint should be filed no more than one year from the date of the alleged incident(s).

Name of Complainant: The name of the person who is filing the complaint.

Status: Indicate whether you are a faculty, staff, student employee, a student, an applicant, former employee, or if you have another affiliation with RSU 16.

Complainant's Department: If you are an employee, the department in which you work; if you are a former employee, the department in which you previously worked.

Contact Information: Provide the phone number(s), email and mailing address where you can be reached.

Select the basis for which you feel you have been subjected to discrimination, harassment, or retaliation:

Age: 40 years or older

Ancestry: Any

Citizenship: Citizens and non-citizens

Disability: Actual or perceived physical or mental disability, including HIV and AIDS

Gender Identity: Individuals whose perceived gender characteristics are different from those traditionally associated with the individual's sex at birth

Marital Status: Married or single, divorced, separated, widowed

Medical Condition: Cancer-related condition or genetic characteristics

Genetic Information: Prohibits the use of genetic information in employment and the intentional acquisition of genetic information about applicants, employees, and employed family members (including family medical history)

National Origin: Including language-use restrictions

Race or Color: Includes complexion, color of skin, eyes or hair

Religion: All aspects of religious observance or practices, beliefs, or non-beliefs

Sex: Gender (includes pregnancy discrimination)

Pregnancy: Pregnancy, childbirth, or related medical conditions

Sexual Orientation: Actual or perceived sexual preference

Service in the Uniformed Services or Covered Veterans: includes membership, application for membership, performance of service, application for service, or obligation for service in the uniformed services; veterans with disabilities, recently separated veterans, Vietnam era veterans, veterans who served on active duty in the U.S. Military, Ground, Naval or Air Service during a war or in a campaign or expedition for which a campaign badge has been authorized, or Armed Forces service medal veterans

Sexual Harassment: If you feel that you have been sexually harassed, please check YES

Date(s): (month, day and year): Dates of alleged incident(s) of discrimination/harassment/retaliation

Complaint: Be as specific as possible. Include the following information: name of individual(s) who discriminated against you, what happened, and why you believe the discrimination was related to any basis listed in section 6 (race, color, etc...). If you have any witnesses, please provide contact information. Attach additional sheets if necessary.

Grievance: If you have filed a grievance with Employee/Labor Relations or your Union, check "yes" and provide the date you filed.

Government Agency: If you have filed a complaint with a government agency (EEOC, etc...), check "yes", the agency with which you filed, and provide the date you filed.

Resolution: What actions will resolve your complaint (e.g. training opportunity, cease the alleged behavior, etc)?

Signature: Sign and email, mail, or fax the completed FORM to the address below.

Attach any additional documentation which supports your claim of discrimination/harassment/retaliation.

Your complaint should be filed no more than one year from the date of the alleged incident(s).

Information and assistance in completing this Complaint Form may be obtained from the Affirmative Action/Title IX Office.

**RSU 16 Affirmative Action & Title IX Office
DISCRIMINATION COMPLAINT FORM**

1. **Name of Complainant:** _____

2. **Check one:**

- Staff Faculty Student Employee Former Employee
 Student Applicant Other: _____

3. **Complainant's Department** (if employed at RSU): _____

4. **Contact Information:** Phone(s): _____ E-mail: _____

Mailing Address: _____

5. a. **I believe I was subjected to** **discrimination** **harassment** **retaliation** **because of my:**

- | | | |
|--|--|---|
| <input type="checkbox"/> Race | <input type="checkbox"/> Disability (physical or mental) | <input type="checkbox"/> Citizenship |
| <input type="checkbox"/> Color | <input type="checkbox"/> Sexual Orientation | <input type="checkbox"/> Marital Status |
| <input type="checkbox"/> Age (40 and over) | <input type="checkbox"/> Sex (Gender) | <input type="checkbox"/> National Origin/Ancestry |
| <input type="checkbox"/> Gender Identity | <input type="checkbox"/> Religion | |
| <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Service in the Uniformed Services or Covered Veterans | |
| <input type="checkbox"/> Medical Condition (cancer-related or genetic characteristics) | | |
| <input type="checkbox"/> Genetic Information (including family medical history) | | |
| <input type="checkbox"/> Other (please specify) _____ | | |

b. **I believe I have been sexually harassed** Yes No

c. **I believe my employment atmosphere could be considered a hostile work environment** Yes No

6. **Date(s) of alleged claim:** _____

7. **State your complaint:** (attach additional sheets if necessary; you do not have to hit RETURN, the sentence will wrap)

8. a. **If you are an RSU 16 employee, have you filed a grievance with your union?** Yes No

b. **If yes, please provide date you filed grievance:** _____

9. a. **Have you filed a complaint with a government agency regarding this situation?** Yes No

b. **If yes, please indicate agency name and date complaint was filed:** EEOC Other: _____

Date Filed: _____

10. **What would you consider to be a successful or acceptable outcome/resolution to your complaint?**

11. **Signature:** _____ **Date:** _____

12. **Complaint taken By:** _____ **Date:** _____

Complaints should be filed no more than one year from the date of the alleged incident(s).

Please MAIL or EMAIL completed form to:
RSU 16 Affirmative Action Office, 3 Aggregate Road, Poland, ME 04274
Email: jhawley@rsu16.org - 207-998-2727