

**Deer Valley Unified School District**  
**TITLE IX FORMAL COMPLAINT FORM**

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Deer Valley Unified School District (DVUSD) complies with federal and state laws prohibiting unlawful discrimination based on race, color, national origin, sex, disability and age in its programs and activities. Any person that believes they have been harassed or discriminated against based on his/her sex can file a complaint under this procedure by contacting the DVUSD Title IX Coordinator as follows:

Scott Warner  
Title IX Coordinator  
Director of School Operations and Athletics  
20402 N. 15<sup>th</sup> Ave  
Phoenix, AZ 85027  
623-445-4981  
Scott.warner@dvusd.org

Date: \_\_\_\_\_

Complainant Name: \_\_\_\_\_

Parent/Guardian (if applicable) \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Telephone: \_\_\_\_\_  
Home Work

Respondent Name (s): \_\_\_\_\_  
(person(s) whom complaint is against)

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1. Describe the alleged sexual harassment in specific terms (attach additional pages if necessary). Include:
    - a. The specific incident or activity that is alleged to be in violation of Title IX
    - b. The name of all individuals involved;
    - c. Dates, times, and locations involved.

2. Describe any relevant communication that has already occurred to address the issue. Please specify the types of communication, dates of communication, and names of individuals with whom any communication has occurred.

3. Do you want this Complaint to be formally investigated and addressed by the School?

Yes  No. If "No", please clarify:

I do not want a formal investigation. I am just bringing this to the School's attention.

I do not want a formal investigation. I would like to speak with the Title IX Coordinator about my complaint.

Other (please explain): \_\_\_\_\_

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date Signed

**PLEASE RETURN THIS FORM TO THE TITLE IX COORDINATOR LISTED ON THIS FORM.**