

## **EQUAL EDUCATIONAL OPPORTUNITY; EQUAL EMPLOYMENT OPPORTUNITY; NONDISCRIMINATION**

The District provides Equal Educational Opportunities and Equal Employment Opportunities and does not discriminate on the basis of race, color, religion, national origin, ancestry, disability, age, marital status, sex, sexual orientation, gender identity or expression, or any other category protected by applicable state or federal law in its program and activity, including employment, and provides equal access to the Boy Scouts of America and other designated youth groups.

What is discrimination?

Discrimination is unfair or unlawful treatment of a person or group because they are part of a defined group, known as a protected class. Discrimination may include treating a person or group differently or denying someone access to a program, service, or activity, because they are part of a protected class, or failing to accommodate a person's disability. Discriminatory harassment is verbal or physical harassment based on a protected class.

What is a protected class?

A protected class is a group of people who share common characteristics and are protected from discrimination and harassment by federal, state, or local laws. Protected classes in the school district are those groups identified in the nondiscrimination statement above, such as race, color, religion, national origin, ancestry, disability, age, marital status, sex, sexual orientation, or gender identity or expression.

### **How do I file a complaint about discrimination?**

If you believe that you or your student has experienced discrimination or discriminatory harassment in the school district, you have the right to file a formal complaint. All formal complaints must: (a) be in writing, (b) be signed by the complainant, and (c) set forth the specific acts, conditions, or circumstances alleged to have occurred that constitute discrimination. Before filing a complaint, you may want to discuss your concerns with the following school official:

Director of Human Resources Lincoln County  
School District  
1191 E. Edwards Street  
Panaca, NV 89042  
(775)728-8000  
sdirks@lcsdnv.com

### **Will my complaint be kept confidential?**

Confidentiality cannot be guaranteed. We often need to disclose the identity of the complainant

to investigate complaint allegations. We will attempt to maintain as much confidentiality as possible by sharing information only with those persons who are considered essential to the investigation and disposition of your complaint. Due process requirements for any person(s) complained about may also require that the school district release information regarding the complaint to the accused. Therefore, requests that any accused person *not* be informed of the complaint may limit our ability to respond to, investigate, and resolve your formal complaint concerns.

**Is retaliation prohibited?**

Yes. It is both illegal and against school district policy for anyone to retaliate against you for filing your complaint.

**Discrimination Complaint Procedure**

The school district has specific complaint procedures for certain allegations of discrimination and harassment, as follows:

Employee Complaints:

1. For employee complaints alleging bullying, harassment, sexual harassment (except sexual harassment prohibited by Title IX), intimidation, discrimination and/or retaliation, see the procedures in the Lincoln County School District Policy Manual.
2. For employee complaints alleging sexual harassment prohibited by Title IX, see the grievance process in Lincoln County School District Policy Manual.

Student Complaints:

3. For student complaints alleging bullying and/or cyber-bullying (except sexual harassment prohibited by Title IX), see the procedures in Lincoln County School District Policy Manual.
4. For student complaints alleging sexual harassment prohibited by Title IX, see the grievance process in the Lincoln County School District Policy Manual.
5. For student complaints alleging discrimination, including harassment, based on disability, see the procedures in the Lincoln County School District Policy Manual.

Students, parents/guardians, employees, or other individuals may **use this procedure** to file a complaint **for all other allegations of discrimination** on the basis of race, color, religion, national origin, ancestry, disability, age, marital status, sex, sexual orientation, sex, gender identity or expression, or any other category protected by applicable state or federal law in its program and activity, including employment, and including the provision of equal access to the Boy Scouts of America and other designated youth groups.

All complaints alleging discrimination will be addressed under applicable district procedures and processes, regardless of whether the complainant accesses the applicable procedure in the first instance.

**STEP ONE**

Provide a signed, written statement about your complaint or complete the form on the following pages. Be as specific as possible when discussing the acts, conditions, or circumstances alleged to have occurred that constitute discrimination. Include the date(s), incident(s) that occurred, the name(s) of the person(s) involved, and the name(s) of those who may have additional information. You are encouraged to attach additional materials, which may assist in the investigation process.

## COMPLAINT ALLEGING DISCRIMINATION

### Personal Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ (work/cell)  
Email \_\_\_\_\_  
Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Type of Complaint (mark all that apply)

Discrimination based on:

- Race       Color       Religion       National Origin       Ancestry  
 Disability    Age       Marital Status       Sex       Sexual Orientation  
 Gender Identity or Expression       Other (specify) \_\_\_\_\_

### Date(s) Discrimination Allegedly Took Place

Earliest Date \_\_\_\_\_ Latest Date \_\_\_\_\_

### Person and/or School District Program Allegedly Discriminating

Name \_\_\_\_\_  
School/Department \_\_\_\_\_

Name \_\_\_\_\_  
School/Department \_\_\_\_\_

Name \_\_\_\_\_  
School/Department \_\_\_\_\_

### Describe Your Complaint

Please describe your complaint. Specifically, how were you or your child discriminated against or treated differently from others on the basis of race, color, religion, national origin, ancestry, disability, age, marital status, sex, sexual orientation, gender identity or expression, or any other category protected by applicable state or federal law? Attach additional pages, if necessary.

**Please identify all school district employees to whom you have reported your concerns:**

Reported to (Name) \_\_\_\_\_ Date(s) \_\_\_\_\_  
Describe how concerns were reported \_\_\_\_\_

Describe results \_\_\_\_\_

Reported to (Name) \_\_\_\_\_ Date(s) \_\_\_\_\_  
Describe how concerns were reported \_\_\_\_\_

Describe results \_\_\_\_\_

**Please identify person(s) who have relevant information concerning your complaint:**

Name \_\_\_\_\_  
Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_  
Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_  
Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Corrective Action Desired**

How would you like the school district to resolve your complaint? Attach additional pages, if needed.

**Your Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### **STEP ONE (continued)**

Send your complaint by mail, email, or hand deliver to:

Lincoln County School District, HR Director  
1191 Edward  
Panaca, NV. 89042  
775-728-8000

### **STEP TWO**

The school district Director of Human Resources or designee will conduct a prompt, thorough, and equitable investigation of your complaint and respond to you within 60 calendar days after receiving your complaint, unless the school district extends the timeline. If resolution will take more than 60 calendar days, the school district will notify you in writing about the reasons for the extension and the anticipated response date.

When the school district Director of Human Resources or designee responds to your complaint, the response will include:

1. A summary of the results of the investigation;
2. Whether or not the school district has failed to comply with requirements related to your complaint;
3. Notice of your right to appeal, including where and to whom the appeal must be filed; and
4. Any corrective measures determined necessary to correct any noncompliance.

### **STEP THREE**

If you disagree with the determination of the Director of Human Resources or designee, you may appeal to the Superintendent. You must file a notice of appeal in writing to the Superintendent within 10 business days after you received the response to your complaint. The date you received the response will be the date of personal delivery, or the date of delivery by email, or three days after deposit by first-class mail if delivered by mail. The notice of appeal must specifically state the nature of the disagreement, the reasons underlying such disagreement and how the outcome would be changed by reconsideration of the determination.

The Superintendent or designee will conduct a review of the record to determine whether the preponderance of the evidence supports the determination made by the Director of Human Resources or designee. The Superintendent or designee will issue a written decision and mail it to you within 15 business days of the receipt of the appeal. The decision of the Superintendent or designee is a final decision.

### **COMPLAINTS TO AN EXTERNAL AGENCY**

If a party is not satisfied at any time, including with the Superintendent's decision, the party may file a complaint with the Office for Civil Rights ("OCR") at the United States Department of Education, Office for Civil Rights, 915 2<sup>nd</sup> Avenue, Suite 3310, Seattle, WA, 981174-1099, (206)684-4500. Individuals may also file complaints with any other civil rights entities such as the Nevada Equal Rights Commission:

- Las Vegas Office: 1820 East Sahara Avenue, Suite 314, Las Vegas, NV 89104, phone (702)486-7161, fax (702)486-7054
- Northern Nevada Office: 1325 Corporate Blvd., Room 115, Reno, NV 89502, phone (775) 823-6690, fax (775)688-1292.

## **DISCRIMINATION COMPLAINT/GRIEVANCE PROCEDURE**

All complaints alleging discrimination will be addressed under applicable district procedures and processes, regardless of whether the complainant accesses the applicable procedure in the first instance. Complaints regarding the interpretation or application of the district's nondiscrimination policy shall be processed in accordance with the following procedures:

### **Informal Procedure**

Any person who feels that he/she has been discriminated against should discuss the matter with the building principal, who shall in turn investigate the complaint and respond to the complainant within five school days. If this response is not acceptable to the complainant, he/she may initiate formal procedures.

If the building principal is the subject of the complaint, the individual may file a complaint directly with the superintendent. If the superintendent is the subject of the complaint, the complaint may be filed with the Board chair.

### **Formal Procedure**

Step I: A written complaint must be filed with the building principal within five school days of receipt of the response to the informal complaint. The written complaint may be mailed or delivered in person to the building principal. The building principal shall further investigate, decide the merits of the complaint and determine the action to be taken, if any, and reply, in writing, to the complainant within ten school days.

A format for the written complaint appears on the following pages of this Administrative Regulation.

Step II: If the complainant wishes to appeal the decision of the principal, he/she may submit a written appeal to the superintendent within five school days after receipt of the building principal's response to the complaint. The superintendent shall meet with all parties involved, as necessary, make a decision and respond, in writing, to the complainant within ten school days.

Step III: If the complainant is not satisfied with the decision of the superintendent, a written appeal may be filed with the Board within five school days of receipt of the superintendent's response to Step II. In an attempt to resolve the complaint, the Board shall meet with the concerned parties and their representative at the next regular or special Board meeting. A copy of the Board's decision shall be sent to the complainant within ten days of this meeting.





**Describe Your Complaint**

Please describe your complaint. Specifically, how were you or your child discriminated against or treated differently from others on the basis of race, color, religion, national origin, ancestry, disability, age, marital status, sex, sexual orientation, gender identity or expression, or any other category protected by applicable state or federal law? Attach additional pages, if necessary.

[Empty box for describing the complaint]

**Please identify all school district employees to whom you have reported your concerns:**

Reported to (Name) \_\_\_\_\_ Date(s) \_\_\_\_\_  
Describe how concerns were reported \_\_\_\_\_  
Describe results \_\_\_\_\_

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Describe how concerns were reported \_\_\_\_\_  
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**Please identify person(s) who have relevant information concerning your complaint:**

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Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_  
Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Name \_\_\_\_\_  
Relationship to you (colleague, friend, family member, teacher, etc.) \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**Corrective Action Desired**

How would you like the school district to resolve your complaint? Attach additional pages, if needed.

**Your Signature**

**Date**