

**Equal Opportunity**

**Civil Rights, Title IX, Section 504 Documentation Form**

**DOCUMENTATION FORM  
(Title IX and Section 504)**

Name of individual alleging noncompliance with Regulations outlined in Title IX and Section 504.

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

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

State the nature of the complaint and the remedy requested.

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Indicate Principal's or Supervisor's response or action to above complaint.

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\_\_\_\_\_  
Principal's Signature