# What to Do When Your Child is Bullied or Harassed

A Parent's Guide to Advocacy in Pennsylvania Public Schools



# ABOUT ELC

Education Law Center-PA (ELC) is a nonprofit, legal advocacy organization with offices in Philadelphia and Pittsburgh dedicated to ensuring access to a quality public education for all children in Pennsylvania.

Through legal representation, impact litigation, policy advocacy, and community engagement, ELC advances the rights of underserved children, including children living in poverty, children of color, children with disabilities, English learners, children in the foster care and juvenile justice systems, LGBTQ youth, and children experiencing homelessness.

#### ACKNOWLEDGMENTS

This guide was prepared by Education Law Center, with principal author Lizzy Wingfield, Esq., Stoneleigh Emerging Leader Fellow 2017–2019, and staff attorney Kristina Moon.

This publication was made possible by the generous support of the Stoneleigh Foundation. The Stoneleigh Foundation was founded in 2006 by John and Chara Haas to improve the life outcomes of Philadelphia's most underserved youth. They meet this mission by awarding Fellowships to exceptional leaders who advance change in the systems that serve these young people.

ELC would also like to thank all of the young people, youth-serving professionals and organizations, and intake callers who told us that parents in Pennsylvania need more tools to address bullying and harassment.

Design by Untuck

#### Published July 2019 Rev. 09.2019

Part or all of this publication may be reproduced if credited to Education Law Center. This publication may be downloaded at www.elc-pa.org.

ELC's publications provide a general statement of the law. However, each situation is different. If questions remain about how the law applies to a particular situation, contact ELC's Helpline for information and advice, or contact an attorney of your choice.

#### **PHILADELPHIA**

1315 Walnut Street, 4th Floor Philadelphia, PA 19107 215-238-6970

#### PITTSBURGH

429 Fourth Avenue, Suite 702 Pittsburgh, PA 15219 412-258-2120



facebook.com/educationlawcenter

WWW.ELC-PA.ORG

# TABLE OF CONTENTS

Introduction and Quick Reference to Advocacy Tips	
How Do I Know if My Child's Experience Qualifies	
as Bullying or Harassment?	6
Differences Between Bullying and Harassment	6
What is a Protected Class?	

# HARASSMENT

What Can I Do if My Child is Being Harassed?	8
Harassment of Students with Disabilities	
Harassment on the Basis of Other Protected Classes (race, national	
origin, sex, gender identity, sexual orientation, religion)	11
· Philadelphia	11
Other Pennsylvania School Districts	14

# BULLYING

V

lied?17	Vhat Can I Do if My Child is Being
	· Philadelphia
s19	· Other Pennsylvania School Dis

# **APPENDICES**

# **Advocacy Tools and Sample Documents**

- A. Model Safety Plan
- B. Safety Plan Options: Items to consider adding to a safety plan
- C. Template for Keeping Records of Bullying/Harassment Incidents
- D. Sample Letter: Requesting a team meeting to address bullying
- E. Sample Letter: Requesting child be evaluated for special education
- F. Sample Letter: Requesting child be re-evaluated because not making progress in special education
- G. List of organizations that could help advocate in the special education process
- H. Sample Letter: Requesting an investigation
- I. Template for Appealing a School's Decision after Bullying/Harassment Investigation (Copy of the School District of Philadelphia's form & letter for other districts)
- J. Guidance for Testimony to a School Board
- K. Philadelphia Commission on Human Relations Intake Form
- L. Pennsylvania Human Relations Commission Discrimination Questionnaire
- M. U.S. Department of Education Office of Civil Rights Complaint Form



# INTRODUCTION

Bullying and harassment are pervasive problems in Pennsylvania, the United States, and even globally.<sup>1</sup> Students who are bullied are at increased risk of experiencing health problems, academic struggles, and more frequently drop out of school.<sup>2</sup>

If the school knows that a current student is being bullied or harassed by another student at school, on school grounds, in school vehicles, at a designated bus stop or at any activity sponsored, supervised or sanctioned by the school, the school has a legal duty to investigate and take action to keep your child safe. The school should also provide your child supports and interventions when bullying or harassment occurs outside of school (including on social media) if it is substantially interfering with your child's education or causing a threatening environment. This guide offers suggested steps to ensure the school fulfills these duties. The Guide is organized by geographic areas, because the legal options to complain about harassment can vary depending on where you live. So for example, you can turn directly to the pages that cover Philadelphia if your child attends a School District of Philadelphia or charter school in Philadelphia.

### WHAT THIS GUIDE COVERS

This guide describes the rights of students and legal duties of public schools in Pennsylvania, including charter schools. It does not cover students who are in a private school and are placed there by a guardian. If your child has a disability and was placed at a private school through a public school, your child has additional rights and you should call Education Law Center for advice at 215-238-6970.

# QUICK REFERENCE: BASIC ADVOCACY TIPS

The most important thing is to report bullying promptly and take good notes regarding bullying incidents and communications with your school. You can keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is bullied or harassed
- who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the bullying happened
- who saw the bullying
- who your child told about the bullying
- □ when you report the bullying and who you report it to, and what they say.
- Always keep copies of any letters, reports, or other materials you receive or give to school officials. You can create a separate folder in your email to save messages to and from the school staff. You can also take a picture of hard-copy documents and email them to yourself to save them in your email-folder.
- Would your child benefit from emotional or mental health support? If your child is feeling down, sad, anxious, is fearful of going to school, is having thoughts of hurting herself or death by suicide, or is having other mental health struggles, you should consider arranging for counseling or therapy for your child. You should also keep records of your child's counseling or therapy visits

to show how the bullying or harassment has affected your child. If your child is diagnosed with a mental health condition, you can ask for a special education plan or 504 Plan to address the bullying or harassment. Directions for how to ask for a special education plan are on page 9, and you can find factsheets about 504 Plans on ELC's website.

#### School Meetings

- Before you go to a school meeting, write up a list of issues you would like to discuss and determine what you want the school to do. Appendix B has a list of possible actions you could ask the school to take.
- When you attend school meetings, ask each person at the meeting to tell you their name and position and keep notes.
- Make sure to ask questions if you don't understand something.
- Don't sign anything that you don't understand. You can always take papers home to read before you sign them.
- If you do not receive anything in writing at the meeting, send an email or a letter afterwards that gives a summary of everything you talked about and everything that the school agreed to.

Follow-up with school officials. If a school official has agreed to do something, make sure it gets done. Be persistent and respectful.

# HOW DO I KNOW IF MY CHILD'S EXPERIENCE QUALIFIES AS BULLYING OR HARASSMENT?

The Difference Between Bullying and Harassment

### BULLYING

In Pennsylvania, your child meets the legal definition of being **bullied if all** of the following boxes can be checked:

- Another student or group of students did something or said something highly offensive to your child;
- □ The other student did what they did to your child on purpose ("intentional" act);
- The other student's action(s) took place in school, on school property, at a bus stop, or at a school event;
- □ The other student's actions targeting your child are: severe, something that many students do to your child or that happens often to students in your child's school, and/or something that the student did to your child repeatedly; and
- What the other student or students did is so significant that it makes a big difference in your child's education, creates a threatening environment for your child, or keeps the school from running normally.<sup>3</sup>

The key difference between bullying and harassment is *why* other students are targeting your child.

# HARASSMENT

If other students are targeting your child because s/he is a member of a "protected class" (defined below), then your child may be experiencing harassment. Sometimes the insults or language a student uses can signal that they are targeting your child because of traits of a protected class.

#### What is a Protected Class?

A protected class is a group of people for whom our civil rights laws provide protections because they have been historically discriminated against and treated unfairly. The legal options to complain about harassment can vary depending on where you live, so this Guide is divided into geographic regions when needed to describe which classes are protected in different areas. **Under Pennsylvania and federal laws**, schools must try to stop the harassment if your child is being targeted because of one or more of the following protected classes:

- Ancestry;<sup>4</sup>
- Color;<sup>5</sup>
- Disability;<sup>6</sup>
- National Origin;<sup>7</sup> including immigration status and limited English proficiency
- Race;<sup>8</sup>
- Religion;9
- Sex, which includes:
  - · Gender,
  - · Gender Identity,
  - · Gender Expression,
  - · Sexual Orientation,<sup>10</sup>
  - Sexual Harassment (including unwelcome conduct of a sexual nature, including sexual advances, talking about or requesting sex acts, unwanted sexual contact, and sexual violence including rape)<sup>11</sup>
- Use of a Support Animal<sup>12</sup>

**In Philadelphia**, in addition to the groups of people listed for Pennsylvania and federal protections, schools must try to stop the harassment if students are targeted because of one of the following protected classes:

- Breastfeeding parent,
- Survivor of sexual violence,
- Familial status (meaning discrimination against a student because they care for a family member) or
- Marital status (meaning discrimination because a student is not married, married, separated, divorced, or widowed).<sup>13</sup>

**In Pittsburgh and Allegheny County**, in addition to the groups listed for Pennsylvania and federal protections, students may be in a protected class because of:

- Family status (including discrimination because the student is pregnant, trying to get custody of someone under the age of 18, or because of the guardian the student lives with), or
- Marital status.14

**Other geographic areas.** If you live outside of Philadelphia and Allegheny County, you should check your local city or county antidiscrimination law (called an "ordinance") to see what it lists as a protected class.

**School district protected classes.** School districts are required to publicly post their anti-harassment policies. You should look up the anti-harassment policy of your school district's website or in the Code of Conduct to review which protected classes the school district identifies, because your district may include more protected classes than what is listed above. For example, in addition to the above classes, the School District of Philadelphia also lists English language proficiency, socioeconomic status, and political beliefs as protected classes.<sup>15</sup>

# The actions and statements targeting your child may reference a protected class.

For example, if your child has an intellectual or learning disability, and bullies call your child "dumb," "stupid," or a slur related to her disability, that could be a sign your child is being harassed because of her disability.

If your child is a boy and is called anti-gay slurs, "sissy," or is compared to girls in a derogatory way, that is a sign your child is being harassed because of what the bullies think about his gender or sexual orientation. Racial slurs are also signs of harassment.

Sexual harassment can include "unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature."<sup>16</sup> Sexual harassment falls under the "sex" protected class, no matter your child's gender or the gender of the students who are targeting them. Common signs of sexual harassment include if another student makes sexual advances toward your child in a way that makes her uncomfortable or tries to touch your child in a way that is inappropriate. It is also a sign of sexual harassment if students are targeting your child with comments suggesting she is sexually active, including "slut," "whore," "call Lea for a good time."

In some cases, children are harassed because of multiple protected classes, such as race and gender. No matter if the harassment is on the basis of one class or several, schools are required under law to treat harassment especially seriously.



# What Can I Do if My Child is Harassed?

**First, identify what about your child the other student(s) are focusing on.** What are the comments or insults the bully uses to target your child? For example, do the comments relate to your child's race, disability, or religion?

Second, determine if the other student(s)' focus counts as a protected class where you live. Page 6–7 explains protected classes in different geographic areas of Pennsylvania. (If the bully's actions are not based on a protected class category, follow the advocacy steps described for bullying, at page 17.)



Your child may be harassed because of multiple protected classes, for instance if your child is a Black girl, students may be harassing her because of both her race and her sex.

If your child is harassed because of more than one protected class, make sure to **note each of her protected classes** when reporting that your child is being harassed. If your child has an IEP, we recommend following the steps on page 9, even if the harassment is not based on her disability, because the structure and federal rights in the IEP process are good protections.

#### **ADVOCACY STEPS**

# Bullying or Harassment of Students with Disabilities

**ALL PENNSYLVANIA SCHOOL DISTRICTS** 

If your child has a disability and is bullied or harassed, the harassment must be addressed in their IEP or 504 plan. Students with disabilities have the right to free appropriate public education ("FAPE"), and harassment or bullying that interferes with the child's ability to attend school or focus and make progress in school may be a legal denial of the child's special education rights. You may be entitled to compensatory education (money or services to help your child catch up in school) if the school did not try and stop the bullying when they should have. Read ELC's <u>special education guide</u> for more information.

### **1. KEEP DETAILED RECORDS**

As with all instances of bullying and harassment, you should make sure to keep detailed records. You can keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is harassed
- who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the harassment happened
- who saw the harassment
- who your child told about the harassment
- when you report the harassment and who you report it to
- □ your child's ideas on what would help make school better for them, to share with the school.

#### 2. ASK THE SCHOOL TO TAKE ACTION

If your child already has an IEP or 504 plan, you should state in any complaint form that your child is a student with disabilities and request an "emergency" team meeting—in writing—to address the bullying or harassment. In your description, describe the specifics and reasons for your child's harassment. To request a team meeting, you should send an email or letter to your principal and director of special education. Make sure to keep a copy of your letter. A sample letter or email may be found in Appendix D.

If your child does not have an IEP or 504 plan but you think that they need one, you can request for your child to be evaluated and that the harassment be addressed as part of the evaluation. To request an evaluation, you should send an email or letter to your principal and director of special education. You should also reference your request for an evaluation in any bullying complaint form. Make sure to keep copies of your letter. A sample letter may be found in Appendix E.

If your child has been struggling to report the bullying, you may request that the IEP team create a goal for developing self-advocacy skills.

If your child is in immediate danger at school, your letter should state that and should ask that the evaluation be completed on an expedited (faster) timeline. While you wait for the evaluation, you can also ask for an interim plan to keep your child safe (or "safety plan"). See Appendix B for tips about safety plans.

ELC's <u>special education guide</u> provides more detail about the evaluation process.

# 3. PARTICIPATE IN THE EVALUATION OR TEAM MEETING

Before the evaluation or team meeting, it may be helpful to have a doctor or psychologist evaluate your child. If your child has developed anxiety or other mental distress since she has been targeted, you should get a letter from your doctor noting those diagnoses and any recommendations for how the school can help. You should also seek your doctor's opinion about what other disabilities your child may have and what your doctor thinks the school should do to address your child's needs. If you bring a letter or note from your doctor to the evaluation and the team meetings, the school will consider that information in the special education plan.

You should also think about what specific help for harassment may be useful for your child. See Appendix A and B for a sample plan to keep your child safe (or "safety plan") and a list of things you can ask your school to do to address the harassment.

# You are allowed to bring an advocate with you to meetings with the school. You may also want an advocate with you at team meetings or when the school informs you of the results of the evaluation. Appendix G lists advocacy organizations that may be able to send someone to attend

If you do not agree with the outcome of the evaluation or team meeting, review Chapter 12 of ELC's <u>special</u> <u>education guide</u> for a list of next steps.

those meetings. You can also hire a private attorney.



## **ADVOCACY STEPS**

# Harassment

Harassment may be based on race/color, national origin, sex/gender, gender identity and gender expression, sexual orientation, relation and all others listed on page 6-7.

### **PHILADELPHIA**

# **1. KEEP DETAILED RECORDS**

As with all instances of bullying and harassment, you should make sure to keep detailed records. You may keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is harassed
- who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the harassment happened
- who saw the harassment
- who your child told about the harassment
- when you report the harassment and who you report it to
- your child's ideas on what would help make school better for them, to share with the school.

#### 2. ASK THE SCHOOL TO TAKE ACTION

In the School District of Philadelphia, you can ask for a harassment investigation to be completed – by letter or email to the principal and/or notifying the school district by filling out <u>an online complaint.</u> If you do not have access to the internet, you can notify the district by calling 215-400-4000.

In a Philadelphia charter school, you should follow the instructions in the school's handbook or website for making a complaint about bullying or harassment. If the charter's policy is not clear, you should write a letter or email to the principal.

ELC recommends sending a written complaint every time your child is harassed in school. If you are filling out an online form, you should keep a copy (print or take a photo of the screen) in case the online form does not send you a copy by email. If you called with a complaint, make a note of the date you called and who you spoke to.

If you are worried about your child's safety while the school investigates the harassment, you should email or write a letter to your principal asking for an emergency meeting to create a plan to ensure your child's safety (or "safety plan") until the investigation is completed. See Appendix B for a list of suggestions of measures that could go in a safety plan.

#### 3. FOLLOW UP

If your child continues to be harassed, you should submit another bullying/harassment form each day your child is harassed. Submitting a form every time this happens is important because it will show what the school did and did not do for your child. This record also may be helpful in the event that you choose to seek legal help.

#### School District of Philadelphia

The School District of Philadelphia policy suggests that you should get a response to your request for an investigation within 7 school days unless your school has informed you it needs additional time.<sup>17</sup> If you have not heard back from your school or the district within 7 days, you should contact the Office of Climate and Safety at the School District of Philadelphia by calling 215-400-4000. You can

also send your principal a letter or an email asking for an update on the harassment investigation. You should keep a copy of the letter or email. If you do not receive a response within 14 school days, consider moving on to other forms of advocacy.

If you received a response from your school or the district about your harassment complaint, but you are unhappy that they either 1) did not find that your child was harassed or 2) found that your child was harassed but are not addressing the harassment appropriately, you should first meet with your principal to share your concerns. If the meeting with the principal does not resolve your concerns, you can file an appeal within 15 calendar days of getting the results of the investigation.<sup>18</sup> You can appeal the results of the investigation by submitting an appeal (see a template of an appeal letter in Appendix I) and sending it to the District's Title IX coordinator (address below). The Coordinator should respond to your appeal within 15 days.<sup>19</sup> If the Coordinator does not respond, or the response does not resolve the issue, consider moving on to other advocacy options.

Chief Student Support Services Officer Title IX Co-Coordinator, Karyn Lynch 440 N. Broad Street, Philadelphia, PA 19130

#### **Philadelphia Charter Schools**

Each charter school may have its own policy for appealing the investigation and finding of a harassment complaint. Follow the instructions in your charter school's policy. If the policy is not clear, write a letter to the Executive Director or Board of Directors of your charter school.

# 4. TESTIFY BEFORE THE SCHOOL BOARD

If the school or district is not helpful in stopping the harassment of your child, you can speak to the school board to inform them of your child's experience and ask them to step in.

**For a school in the School District of Philadelphia:** You can register to speak at an Action Meeting or a Student Achievement and Support Committee Meeting. You can

register to speak at an Action Meeting by filling out an <u>online</u> form or calling 215-400-5959. You can register to speak at a Student Achievement and Support Committee Meeting by filling out a form or calling 215-400-4010. You should plan to speak for three minutes or less at the meeting. You should also bring a copy of what you are planning to say to the board. For guidance about how you could prepare remarks to the board, see Appendix J.

**For a Philadelphia charter school:** Meetings of the board of directors for the charter school should be publicly posted on the school's website. You can also ask the school staff when the board meets and how you can sign up to speak at the board meeting. If you cannot find information about speaking at a board meeting for your charter school, call the School District of Philadelphia's Charter School Office and ask them for help. You can contact the Charter School Office by emailing <u>charters@philasd.org</u>, calling 215-400-4090, or going in person to 440 North Broad Street, first floor, suite 102.

You do not have to wait to testify to the school board before filing a complaint with an outside agency (see step below). You can plan to talk to the school board at the same time you are filing a complaint with an outside agency or file a complaint without ever testifying before the school board. However, ELC recommends testifying before the school board first because a school board can move faster to address your concerns than an outside agency.

# 5. FILE A COMPLAINT WITH AN OUTSIDE AGENCY

As with all school districts in Pennsylvania, you have the option of submitting a complaint regarding harassment to the state civil rights agency, the Pennsylvania Human Relations Commission (PHRC), and/or to the U.S. Department of Education's Office of Civil Rights (OCR). Directions for how to file a complaint with the PHRC are on page 15 and directions for how to file a complaint with OCR are on page 16.

**In Philadelphia**, you can also submit a complaint to the Philadelphia Commission on Human Relations (PCHR). You are allowed to submit a complaint to any or all of these agencies at the same time. However, it is possible that only one agency will investigate your complaint.

### Harassment

# Filing a Complaint with the Philadelphia Commission on Human Relations

- Types of Harassment Cases You Can Take to the PCHR
  - You can file a complaint with the Philadelphia
     Commission on Human Relations if your child was
     discriminated against because of their ancestry,
     color, disability, status as a survivor of domestic or
     sexual violence, ethnicity, familial status, gender
     identity, marital status, national origin, race, religion,
     sex, or sexual orientation.<sup>20</sup> Sex discrimination
     includes discrimination involving discrimination
     based on pregnancy or childbirth.<sup>21</sup>
- How to Ask the PCHR to Investigate
  - PCHR can investigate your child's harassment if students have targeted your child within the last 300 days. You can ask the PCHR to investigate your

child's harassment by filling out an <u>intake form</u>, which can be found in Appendix K. Public schools are considered "public accommodations," so you should fill out the public accommodations form.

 After you fill out the form, you should fax, mail, or bring it in person to the PCHR (see address below).
 After they have received your form, they will schedule a meeting with you to discuss if they can help you.

Philadelphia Commission on Human Relations 601 Walnut Street, Suite 300 South Philadelphia, PA 19106 Phone: 215-686-4670 Fax: 215-686-4684



# **ADVOCACY STEPS**

# Harassment

Harassment may be based on race/color, national origin, sex/gender, gender identity and gender expression, sexual orientation, relation and all others listed on page 6-7.

### OTHER PENNSYLVANIA SCHOOL DISTRICTS

### **1. KEEP DETAILED RECORDS**

As with all instances of bullying and harassment, you should make sure to keep detailed records. You can keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is harassed
- who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the harassment happened
- who saw the harassment
- who your child told about the harassment
- when you report the harassment and who you report it to
- □ your child's ideas on what would help make school better for them, to share with the school.

#### 2. ASK THE SCHOOL TO TAKE ACTION

You should find your school district's bullying and harassment policy. The policy should be located on your school's website, either in its own section or in the district's Code of Conduct. If you cannot find it online, you should be able to call your school and request a copy. In that policy, it will list a staff member who is in charge of bullying and harassment issues.

Once you know the staff person who is supposed to be in charge of harassment issues, you should send an email or letter requesting an investigation to that person, your principal, and your superintendent. If you cannot find the person who is supposed to be in charge of harassment issues, you can send the email or letter to the principal. Make sure to save a copy of whatever you send. In the email or letter, you should describe the harassment and explain that you think your child is being harassed because of their protected class(es). You can use our sample letter in Appendix H.

If you are worried about your child's safety while the school investigates the harassment, you should include in your email or letter to your principal a request for an emergency meeting to create a plan to ensure your child's safety (or "safety plan") until the investigation is completed. See Appendix A and B for a sample safety plan and list of suggestions of measures that could go in a safety plan.

#### **Charter Schools**

You should follow the instructions in the school's handbook or website for making a complaint about bullying or harassment. If the policy is not clear, you should write a letter or email to the principal.

#### 3. FOLLOW UP

Your school's harassment policy should describe how long it will take your school to investigate. If your school does not complete an investigation within that time frame, you should write an email or letter to your superintendent and your school board. Keep a copy of whatever you send. If the school still does not complete an investigation, consider moving on to other advocacy options.

If your school completed an investigation into the

harassment and either did not find that your child was harassed or did not take appropriate steps to make sure your student will not be harassed again, you can follow your school district's appeal process if they have one. The appeal process may be explained in the bullying or harassment policy, though it could also be listed in a separate appeal policy.

#### **Charter Schools**

Each charter school may have its own policy for appealing the investigation and finding of a harassment complaint. Follow the instructions in your charter school's policy. If the policy is not clear, write a letter to the Executive Director or Board of Directors of your charter school.

### 4. TESTIFY BEFORE THE SCHOOL BOARD

If the school or district is not helpful in stopping the harassment, you can speak to the school board to inform them of your child's experience and ask them to step in. You should register to speak at the board meeting ahead of time. You should confirm the length of time you are allowed to speak as well as how many copies of your statement to bring. See Appendix J for guidance about how to speak to the board.

You do not have to wait to testify before the school board before filing a complaint with an outside agency. You can plan to talk to the school board at the same time you are filing a complaint with an outside agency or file a complaint without every testifying before the school board. However, ELC recommends testifying before the school board first because a school board can move faster to address your concerns than an outside agency.

# 5. FILE A COMPLAINT WITH AN OUTSIDE AGENCY

In all school districts in Pennsylvania, you have the option of submitting a complaint regarding harassment to the state civil rights agency, the Pennsylvania Human Relations Commission (PHRC), and/or to the U.S. Department of Education's Office of Civil Rights (OCR). You can submit a complaint with either or both agencies. You should also look up whether your city or county has its own civil rights agency, or human relations commission. However, it is possible that only one agency will investigate your complaint.

# Filing a Complaint with the Pennsylvania Human Relations Commission (PHRC)

- Types of Harassment Cases You Can Take to the PHRC
  - You can file a complaint with the PHRC if your child was discriminated against because of their race, color, sex, ancestry, national origin, religion, disability, or the use of guide or support animals for disability.<sup>22</sup> You can also file a complaint with the PHRC if your child was sexually harassed or harassed because of their sexual orientation or gender identity.<sup>23</sup> Your child must have experienced harassment within the past 180 days for the PHRC to consider your complaint.
- · How to Ask the PHRC to Investigate
  - You can file a complaint with the PHRC by first filling out the education <u>discrimination questionnaire</u>, which can be found in Appendix L. You can either mail the questionnaire into your local PHRC office or you can file it in person at your PHRC office. The local offices are listed below.

The PHRC offices for Adams, Bedford, Berks, Blair, Bradford, Cambria, Carbon, Centre, Clinton, Columbia, Cumberland, Dauphin, Franklin, Fulton, Huntingdon, Juniata, Lackawanna, Lancaster, Lebanon, Lehigh, Luzerne, Lycoming, Mifflin, Monroe, Montour, Northampton, Northumberland, Perry, Pike, Schuylkill, Snyder, Somerset, Sullivan, Susquehanna, Tioga, Union, Wayne, Wyoming, and York counties:

PHRC Harrisburg Regional Office 333 Market Street, 8th Floor Harrisburg, PA 17101-2210 717-787-9780 717-787-7279 TTY users only

# Harassment

The PHRC offices for Bucks, Chester, Delaware, Montgomery, and Philadelphia counties:

# PHRC Philadelphia Regional Office 110 North 8th Street, Suite 501 Philadelphia, PA 19107 215-560-2496 215-560-3599 TTY users only

The PHRC offices for Allegheny, Armstrong, Beaver, Butler, Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Indiana, Jefferson, Lawrence, McKean, Mercer, Potter, Venango, Warren, Washington, and Westmoreland counties:

# PHRC Pittsburgh Regional Office 301 Fifth Avenue Suite 390, Piatt Place Pittsburgh, PA 15222

412-565-5395 412-565-5711 TTY users only

# Filing a Complaint with the Federal Government through the Office of Civil Rights

- Types of Harassment Cases You Can Take to the OCR
  - You can file a complaint with the U.S. Department of Education's Office of Civil Rights if your child was discriminated against because of their race, color, national origin, ethnicity, or ancestry.<sup>24</sup> This includes if your child is harassed because they are an English learner or because your child is Hindu, Jewish, Muslim, or Sikh.<sup>25</sup> You may also file a complaint if your child was harassed because of their sex.<sup>26</sup> Sex-

based harassment includes harassment because of your child's sexual orientation, because they do not act like a stereotypical boy or girl, or because they are or are not pregnant or a parent.<sup>27</sup>

- While the OCR used to take cases relating to harassment because a child is transgender, under the Trump Administration, the OCR has stopped investigating many of those claims.<sup>28</sup> If your child is being harassed because they are transgender, nonbinary, or gender-nonconforming, you may submit a complaint to the OCR, but you should also submit a complaint to the PHRC and/or your local human relations agency if your local ordinance protects transgender people.
- · How to Ask the OCR to Investigate
  - You can ask the OCR to investigate if your child was harassed and the school failed to respond within the last 180 days. You <u>can submit a complaint form</u> <u>online</u> or by mail (a copy is in Appendix M). If OCR needs information from you, they will contact you.<sup>29</sup> Make sure to respond to any requests from OCR within 14 calendar days. More information on the process can be found <u>on the OCR's website</u>.



# What Can I Do if My Child is Bullied?

If your child's experiences include all of the factors below but your child is <u>not</u> being targeted because of a protected class (listed on page 6–7), then your child may be experiencing bullying, not harassment.

In Pennsylvania, your child meets the legal definition of being bullied if all of the following boxes can be checked:

- Another student or group of students did something or said something highly offensive to your child;
- The other student did what they did to your child on purpose ("intentional" act);
- The other student's action(s) took place in school, on school property, at a bus stop, or at a school event;
- □ The other student's actions targeting your child are: severe, something that many students do to your child or that happens often to students in your child's school, and/or something that the student did to your child repeatedly; and
- □ What the other student or students did is so significant that it makes a big difference in your child's education, creates a threatening environment for your child, or keeps the school from running normally.<sup>30</sup>



We recommend that you follow these advocacy steps to collect clear records of the incidents and harm caused to your child, and always make your requests for help in writing when asking your school to address the bullying.

# Bullying

**PHILADELPHIA** 

### **1. KEEP DETAILED RECORDS**

As with all instances of bullying and harassment, you should make sure to keep detailed records. You can keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is bullied
- □ who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the bullying happened
- who saw the bullying
- who your child told about the bullying
- when you report the bullying and who you report it to
- □ your child's ideas on what would help make school better for them, to share with the school.

### 2. ASK THE SCHOOL TO TAKE ACTION

In Philadelphia, you can request an investigation into your child's bullying by writing to the principal and/or notifying the school district by filling out <u>an online form that is</u> <u>submitted to the District</u>. If you do not have access to the internet, you can tell the school district by calling 215-400-4000 to make a report.

You should make a complaint—whether through the online form or by email or letter to the principal—every day that your child is bullied in school. If you are filling out the form online, you should keep the copy of the form that is sent to your email. If you called in your complaint, make a note of the date you called and who you spoke to.

If you are worried about your child's safety while the school investigates the bullying, you should email or write a letter to your principal asking for an emergency meeting to create a plan to ensure your child's safety (or "safety plan") until the investigation is completed. See Appendix A and B for a model safety plan and a list of suggestions of measures that could go in a safety plan.

#### 3. FOLLOW UP

If your child continues to be bullied, you should submit

another complaint for each day your child is bullied.

You should get a response to your request for an investigation within 7 school days. If you do not hear back from your school or the District within 7 days, you should inform the District by calling 215-400-4000. You should also send your principal a letter or an email asking for an update on the bullying investigation. You should keep a copy of the letter or email. If you do not receive a response within 14 school days, you should consider moving on to other advocacy options.

If you received a response from your school or the District about your harassment complaint, but you are unhappy that they either 1) did not find that your child was bullied or 2) found that your child was bullied but are not addressing the bullying appropriately, you should meet with your principal to express your concerns.

If a meeting with the principal does not resolve your concerns, you can file an appeal within 15 calendar days of getting the results of the investigation. You can appeal the results of the investigation by filling out the <u>appeal form</u> (see Appendix I) and giving it to the district, either in person or via email. The district should get back to you within 21 school days. Make sure to keep a copy of your appeal. If you do not get a response within 21 days or if you do not like the results of your appeal, you can consider moving on to other advocacy options.

### 4. TESTIFY BEFORE THE SCHOOL BOARD

If the District is not helpful in getting your school to stop your child's bullying, you can speak to the school board to tell them about your child's experience. You can register to speak at an Action Meeting or a Student Achievement and Support Committee Meeting. You can register to speak at an Action Meeting by filling out an <u>online form</u> or calling 215-400-5959. You can register to speak at a Student Achievement and Support Committee Meeting by <u>filling out</u> <u>a form</u> or calling 215-400-4010. You should plan to speak for 3 minutes or less at the meeting. You should also bring a copy of what you are planning to say to the board. For guidance about how you could prepare remarks to give to the board, see Appendix J.

# Bullying

# **OTHER PENNSYLVANIA SCHOOL DISTRICTS**

#### **1. KEEP DETAILED RECORDS**

As with all instances of bullying and harassment, you should make sure to keep detailed records. You can keep records for yourself in a notebook, on your phone, or on your computer. Your notes should include:

- dates when your child is bullied
- □ who the students targeting your child are (if possible, keep records of names and grades)
- what the other students say or do to your child (include any pictures of physical injury caused by the bullies, as well as any medical records)
- where the bullying happened
- who saw the bullying
- who your child told about the bullying
- when you report the bullying and who you report it to
- □ your child's ideas on what would help make school better for them, to share with the school.

### 2. ASK THE SCHOOL TO TAKE ACTION

You should read your school district's bullying and harassment policy. That policy should be on your school's website, either in its own section or in the district's Code of Conduct. If you cannot find it online, you should be able to call your school and request a copy. The policy will list a staff member who is in charge of bullying and harassment issues.

Once you identify the staff person who is supposed to be in charge of bullying issues, you should send that person, your principal, and your superintendent an email or letter requesting an investigation. If you cannot find the person who is supposed to be in charge of bullying issues, you can send the email or letter to the principal and superintendent. Make sure to save a copy of whatever you send. In the email or letter, you should describe the bullying, including who your child is being bullied by and what the other students have done or said to your child. You can use our sample letter in Appendix H.

If you are worried about your child's safety while the

school investigates the bullying, you should include in your email or letter to your principal a request for an emergency meeting to create a plan to ensure your student's safety (or "safety plan") until the investigation is completed. See Appendix A and B for a sample safety plan and a list of suggestions of measures that could go in a safety plan.

#### **Charter Schools**

You should follow the instructions in the school's handbook or website for making a complaint about bullying or harassment. If the policy is not clear, you should write a letter or email to the principal.

#### 3. FOLLOW UP

Your school's bullying and harassment policy should say how long the school can take to investigate. If your school does not complete an investigation in that timeline, you should notify your superintendent and your school board. You should either email or send a letter to the superintendent and the school board and keep a copy of whatever you send. If the school still does not complete an investigation, consider moving on to other advocacy options.

If your school completed an investigation into the bullying and either 1) did not find that your child was bullied or 2) did not take appropriate steps to make sure your student will not be bullied again, you can follow your school district's appeal process if they have one. If they do not have an appeal process or if the appeal process is not helpful to you, consider moving on to other advocacy options.

#### **Charter Schools**

Each charter school may have its own policy for appealing the investigation and finding of a bullying complaint. Follow the instructions in your charter school's policy. If the policy is not clear, write a letter to the Executive Director or Board of Directors of your charter school.

# 4. TESTIFY BEFORE THE SCHOOL BOARD

If the school or district is not helpful in stopping the bullying, you can speak to the school board to inform them of your child's experience and ask them to step in. Most districts will ask speakers to register before the meeting and to limit remarks to a certain length of time. You should look up your school board's requirements to speak at a meeting. See Appendix J for guidance about how to prepare to speak to the board.





<sup>1</sup> See e.g. GLSEN, School Climate in Pennsylvania 1 (2019) (reporting that LGBTQ students experience high rates of harassment in Pennsylvania schools); National Bullying Prevention Center — Bullying Statistics,

https://www.pacer.org/bullying/resources/stats.asp (last visited May 11, 2019) ("More than one out of every five (20.8%) students report being bullied.").

<sup>2</sup> See Preventing Bullying through Science, Policy, and Practice 115–29 (Frederick Rivara & Suzanne Le Menestrel eds., 2016) (finding that students who were bullied are more likely to experience depression, anxiety, and feelings of loneliness); Jaana Juvonon, *et. al.*, Bullying Experiences and Compromised Academic Performance Across Middle School Grades, 31 J. OF EARLY ADOLESCENCE 152, 167 (2011) (noting how poor academic performance may manifest for bullied youth).

<sup>3</sup> 24 Pa. Stat. Ann. § 13-1303.1-A (West) ("For purposes of this article, 'bullying' shall mean an intentional electronic, written, verbal or physical act, or a series of acts:(1) directed at another student or students; (2) which occurs in a school setting; (3) that is severe, persistent or pervasive; and (4) that has the effect of doing any of the following: (i) substantially interfering with a student's education; (ii) creating a threatening environment; or (iii) substantially disrupting the orderly operation of the school; and 'school setting' shall mean in the school, on school grounds, in school vehicles, at a designated bus stop or at any activity sponsored, supervised or sanctioned by the school."). Note that under the state law, a school has the ability to define bullying under their school policy as encompassing acts that do not occur in a "school setting." *Id*.

4 43 Pa. Stat. Ann. § 955 (West).

- 5 42 U.S.C.A. § 2000d (West); 43 Pa. Stat. Ann. § 955 (West).
- 642 U.S.C.A. § 12182 (West); 43 Pa. Stat. Ann. § 955 (West).
- 742 U.S.C.A. § 2000d (West); 43 Pa. Stat. Ann. § 955 (West).
- 842 U.S.C.A. § 2000d (West); 43 Pa. Stat. Ann. § 955 (West).
- 9 U.S. Const. amend. I; 43 Pa. Stat. Ann. § 955 (West).

<sup>10</sup> 20 U.S.C.A. § 1681 (West); 43 Pa. Stat. Ann. § 955 (West). Gender identity is "[e]xternal manifestations of gender, expressed through a person's name, pronouns, clothing, haircut, behavior, voice, and/or body characteristics." GLAAD, GLAAD Media Reference Guide — Transgender, http://www.glaad.org/reference/transgender (last visited May 9, 2019). Gender identity is "[a] person's internal, deeply held sense of their gender. For transgender people, their own internal gender identity does not match the sex they were assigned at birth. Most people have a gender identity of man or woman (or boy or girl). For some people, their gender identity does not fit neatly into one of those two choices". *Id.* Sexual orientation "[d]escribes a person's enduring physical, romantic, and/or emotional attraction to another person. Gender identity and sexual orientation are not the same. Transgender people may be straight, lesbian, gay, bisexual, or queer. For example, a person who transitions from male to female and is attracted solely to men would typically identify as a straight woman." *Id.* 

<sup>11</sup> See Davis Next Friend LaShonda D. v. Monroe Cty. Bd. of Educ., 526 U.S. 629 (1999).
 <sup>12</sup> 43 Pa. Stat. Ann. § 955 (West).

<sup>13</sup> See Philadelphia, PA., Code § 9-1106 (2016); Phila. Human Relations Commission, Public Accommodations Discrimination,

https://www.phila.gov/HumanRelations/DiscriminationAndEnforcement/WhatIsDisc rimination/Pages/PublicAccommodationsDiscrimination.aspx (last visited Apr. 22, 2019) (defining "familial status" and "marital status").

14 Allegheny Cnty, Pa, Code § 215-35; Pitt. Code § 651.04.

#### <sup>15</sup> The School Dist. of Phila., No. 248, 2 (2018).

16 EEOC, Sexual Harassment,

https://www.eeoc.gov/laws/types/sexual\_harassment.cfm (last visited June 4, 2019).

<sup>17</sup> See The School Dist. of Phila., No. 248, 4 (2018) ("Extenuating circumstances for not being able to comply with the deadline must be approved by the Title IX Deputy Coordinator. The extension must be a specified period of time not exceeding fourteen (14) days, and must be communicated to the complainant."); The School Dist. of Phila., Bullying & Harassment: Office of Climate & Safety, https://www.philasd.org/bullying/ (last visited Dec. 14, 2018) (stating that, after a complainant fills out the bullying and harassment form, "[w]e promise to be back in touch within 7 school days").

<sup>18</sup> The School Dist. of Phila., No. 248, 5 (2018).

#### <sup>19</sup> Id. at 5.

<sup>20</sup> See Pennsylvania Commission on Human Relations, *Public Accommodations Discrimination*,

https://www.phila.gov/HumanRelations/DiscriminationAndEnforcement/WhatIsDisc rimination/Pages/PublicAccommodationsDiscrimination.aspx (last visited Jan. 29, 2019).

 $^{21}$ *Id*.

<sup>22</sup> Pa. Human Relations Comm'n, File a Complaint, https://www.phrc.pa.gov/File-A-Complaint/Pages/About-Filing-A-Complaint.aspx (last visited Feb. 6, 2019).

<sup>23</sup> See Pa. Human Relations Comm'n, Guidance on Discrimination on the Basis of Sex under the Pennsylvania Human Relations Act (Aug. 2, 2018).

<sup>24</sup>U.S. Department of Education, OCR Complaint Forms – Electronic and PDF Versions, https://www2.ed.gov/about/offices/list/ocr/complaintintro.html (last visited Dec. 15, 2018).

<sup>25</sup> Id.

<sup>26</sup> Id.

<sup>27</sup> Id.

<sup>28</sup> See Letter from Candice Jackson, Acting Assistant Secretary of Civil Rights, U.S. Dep't of Educ. Office of Civil Rights, to Regional Directors, U.S. Dep't of Educ. Office of Civil Rights (June 6, 2017), https://www.documentcloud.org/documents/3866816-OCR-Instructions-to-the-Field-Re-Transgender.html.

<sup>29</sup> Allegheny County Human Relations Commission, Complaints, https://www.alleghenycounty.us/commissions/human-relations/complaints.aspx (last visited Apr. 16, 2019).

<sup>30</sup> 24 Pa. Stat. Ann. § 13-1303.1-A (West) ("For purposes of this article, 'bullying' shall mean an intentional electronic, written, verbal or physical act, or a series of acts:(1) directed at another student or students; (2) which occurs in a school setting; (3) that is severe, persistent or pervasive; and (4) that has the effect of doing any of the following: (i) substantially interfering with a student's education; (ii) creating a threatening environment; or (iii) substantially disrupting the orderly operation of the school; and 'school setting' shall mean in the school, on school grounds, in school vehicles, at a designated bus stop or at any activity sponsored, supervised or sanctioned by the school."). Note that under the state law, a school has the ability to define bullying under their school policy as encompassing acts that do not occur in a "school setting," *Id*.

# EDUCATION LAW CENTER

#### PHILADELPHIA

1315 Walnut Street, 4th Floor Philadelphia, PA 19107 215-238-6970

#### PITTSBURGH

429 Fourth Avenue, Suite 702 Pittsburgh, PA 15219 412-258-2120 What To Do When Your Child is Bullied or Harassed: A Parent's Guide to Advocacy in Pennsylvania Public Schools

# APPENDICES Advocacy Tools and Sample Documents

- A. Model Safety Plan
- B. Safety Plan Options: Items to consider adding to a safety plan
- C. Template for Keeping Records of Bullying/Harassment Incidents
- D. Sample Letter: Requesting a team meeting to address bullying
- E. Sample Letter: Requesting child be evaluated for special education
- F. Sample Letter: Requesting child be re-evaluated because not making progress in special education
- G. List of organizations that could help advocate in the special education process
- H. Sample Letter: Requesting an investigation
- I. Template for Appealing a School's Decision after Bullying/Harassment Investigation (<u>Copy of the School District</u> <u>of Philadelphia's form</u> & letter for other districts)
- J. Guidance for Testimony to a School Board
- K. Philadelphia Commission on Human Relations Intake Form
- L. Pennsylvania Human Relations Commission <u>Discrimination</u> <u>Questionnaire</u>
- M. U.S. Department of Education Office of Civil Rights <u>Complaint</u> Form

# EDUCATION

# MODEL SAFETY PLAN

Student's Name:		
Parent's Name:		
	Email:	
Primary Staff Contact:		
Classroom/Homeroom Teacher:		
Grade Level: Room Number:		
Plan start date:	Proposed End date:	

The following safety plan has been developed for the student named above. The sample interventions offered are not intended to be exclusive or all-inclusive. Schools should design a Student Safety Plan that reflects their unique circumstances and resources. This plan does NOT replace an IEP or a Behavior Support Plan. If the student has an IEP, then defer to that plan.

*Note:* Administrative staff should develop this plan **with** the student experiencing bullying/ harassment, in an effort to empower them and keep them safe. A safety plan needs to be individualized, as every student who has experienced bullying/harassment has unique needs and challenges.

# A. BACKGROUND

Brief description of the bullying/harassment student has experienced \_\_\_\_\_\_

How long has the conduct been taking place?

Are there certain locations where the conduct frequently takes place?

Are there certain times when the conduct frequently takes place?

Are there events/factors that frequently the trigger the conduct (i.e.: does the conduct happen after the student answers a question in class or when the student is alone?)

# A. RESPONSIBILITIES AND ROLES

# **Staff Responsibilities**

The following teachers	will be apprised	l of this safety	plan and w	ill make every	effort to
implement it successful	ly:				

The following administrators and school personnel will be apprised of this safety plan and will make every effort to implement it successfully:

Any staff who witness or are made aware of any harassing, intimidating or bullying behavior directed toward the student will intervene immediately and will report such behavior to

# **Parent/Family Responsibilities**

Parents and other family members agree to monitor and support the student with this Safety Plan, monitor the student's use of technologies, and contact school if the problem persists.

The school will immediately report any harassing, intimidating or bullying behavior which it is made aware of to the student 's parents.

The school will meet with the parents [date or frequency] to discuss and review this plan.

Parents are welcome to contact the school at any time to check on the effectiveness of the plan.

# **Student Responsibilities**

The student will make reasonable attempts not have face-to-face contact or online contact with the aggressor while this plan is in effect.

The student will report any breach of this plan, on or off school grounds, to his/her parents, designated point of contact, or other teacher/staff person immediately.

# **Counselor Responsibilities**

The school will perform a *functional behavior assessment* of the student to determine if the student needs additional services to help him/her improve social skills, better engage in conflict resolution, and/or effectively problem solve during emergency situations.

The student will meet with the school counselor to discuss ways he/she will react and deal with conflict and emergency situations in the future, including where the student should go, who they should talk to, and what strategies they can employ.

# **B.** INTERVENTIONS

# **Point of Contact and Trusted Peers:**

	Mr./Ms./Mx will be designated as the student's primary point of
	<ul> <li>contact (trusted adult) on staff.</li> <li>The primary point of contact will be responsible for checking in with the student on a [daily/weekly/biweekly] basis to ensure the safety plan is working. The student in NOT responsible for locating or making contact with the staff member. Conversations should occur in a private location.</li> <li>The student is responsible for checking in with the primary point of contact to ensure the safety plan is working. The student is working. The student will report to the primary point of contact to ensure the safety plan is working. The student will report to the primary point of contact's office/classroom at</li> </ul>
_	[time and dates].
	Mr./Ms./Mx is designated as the student's backup point of contact. The backup point of contact has all the same responsibilities as the primary point of contact when that person is absent or unavailable. The primary point of contact is responsible for informing the backup point of contact when they are absent.
	The student can request to meet with the primary point of contact at any time if he/she feels unsafe. If the primary point of contact is not available the student will either be able to meet with the backup point of contact or
	The school and/or student have identified the following students as trusted peers:
<u>Cla</u>	ssroom Times:
	The student's schedule will be changed in the following ways (attach new schedule)
	The following teachers will keep the student and his/her aggressor separated in the classroom and during class activities:
	The student will be seated near one or more of their trusted peers in all classes.
	Teachers will address any bullying, intimidation, harassment and/or retaliation immediately and will report such conduct to as soon as possible.

# MODEL SAFETY PLAN

# Passing Times:

The student will be able to transition before/after [circle one] other students or at the front/back [circle one] of the line and will be separated from his/her aggressor.		
The student will be able to transition between classes wit	h one or more of their trusted peers.	
The student will take the following route when transition	ing between classes:	
Mr./Ms./Mx. is designated as the be visible and available during hallway transitions.	student's hallway monitor and will	
The student's locker will be changed to a different location	on.	
The student will have special bathroom privileges in order to avoid contact with aggressors in the restrooms. These privileges include:		
Use of a single stall/staff restroom		
Ability to visit the restroom with a trusted peer		
Ability to use the bathroom at certain times of the	e day	
Other		
Lunch and Recess		
Lunch and Recess Mr./Ms./Mx. monitor and will be visible and available during lunch.	is designated as the student's lunch	
Mr./Ms./Mx.	_ is designated as the student's lunch _ is designated as the student's recess	
<ul> <li>Mr./Ms./Mx</li></ul>	is designated as the student's recess	
<ul> <li>Mr./Ms./Mx</li></ul>	is designated as the student's recess and recess.	
<ul> <li>Mr./Ms./Mx</li></ul>	is designated as the student's recess and recess.	
<ul> <li>Mr./Ms./Mx</li></ul>	is designated as the student's recess and recess. ed peers during lunch.	
<ul> <li>Mr./Ms./Mx</li></ul>	is designated as the student's recess and recess. ed peers during lunch. y and to report any bus incidents	

# MODEL SAFETY PLAN

The student's transportation will be changed in the following ways:

	Student will be dropped off at school at the following en	ntrance and by	the following people:
	Student will be picked up at school at the following entrance and by the following people:		
<u>Otł</u>	her Interventions:		
Thi whi	s plan is in place from	through essary.	, at
WE	E AGREE TO THE SAFETY PLAN AS STATED ABOVE.		
Stu	dent		Date
Par	ent		Date
Prin	ncipal/Administrator		Date
Tea	acher(s)/Counselor		Date
Cor	mpleted / Modified / Extended:		

\_(Date & Signatures)

# SAFETY PLAN OPTIONS

# Items to Consider Adding to a Safety Plan or Special Education Plan to Address Bullying or Harassment

# THINGS THE SCHOOL CAN DO

- □ Agree to immediately tell you when your child is bullied or harassed
- □ Pick a specific person at the school who will call you regularly to update you about how the safety plan is working.
  - The plan should be specific about:
    - how often the call should happen,
    - at what time, and
    - whether the school should call you or you should call the school.
- □ Pick a specific person to check in with your child at the end of every day so that your child has the opportunity to report any bullying or harassment
  - The person should be someone your child feels comfortable with
  - It should be the responsibility of the person to check in with your child, not your child's responsibility to find them
  - They should meet somewhere privately
  - The school should pick a backup person to check in with your child when the other person is out.
- □ Change the location of your child's locker to be farther away from their bullies or harassers
- □ Change your child's class seat or the seat of the bully
- □ Tell all of your child's teachers and all school staff supervising times when your child and their bully could see each other (such as lunchtime, recess, hallways, school arrival/dismissal) about the safety plan.
- □ Remind all teachers, administrators, and staff of their duty to report any bullying or harassment they see.
- $\Box$  Increase supervision at:
  - $\Box$  School arrival and departure
  - □ recess
  - □ lunch
  - □ gym
  - □ bathrooms
  - $\Box$  locker rooms
  - □ Other points where the bully and your child come into contact, including: \_
- □ Change the bully's schedule or your child's schedule so that they will not have to be near each other during:
  - □ School arrival and departure
  - □ Transportation to and from school
  - □ Class
  - □ Recess
  - □ Lunch
  - □ Gym
  - □ Afterschool activities and/or extracurriculars
  - □ Other points where the bully and your child come into contact, including:

# SAFETY PLAN OPTIONS

- □ Change the bully's or your child's bus route
  - If that is not possible, the bus driver should be told about the bullying and told to step in if your child is bullied or harassed
- □ Give your child access to a bathroom or changing area where they will not have to see their bully, or have the bully use a separate bathroom or changing area
- □ Transfer the bully or your child to a different school within the district
- Assign your child student buddies, who will be with your child when they could come in contact with the bully, such as during lunch, recess, and when my child has to use the bathroom.
  - The student buddies should be students whom your child feels comfortable with and who agree to be your child's buddy.
- □ Assign an adult escort to the bully, who will be with the bully as they walk from class to class. The bully should be told not to leave class until their adult escort is there.
- □ Tell the bully not to contact your child in any way including in person, over social media, or through other students
- □ Train staff and teachers how to better respond to bullying or harassment when it happens
- □ Bring in a cultural competency training for all students so they learn to be more welcoming and accepting of students like my child

# THINGS YOUR CHILD CAN DO

- $\Box$  Agree to go to a specific person during the day if they start to get upset or overwhelmed.
  - The person should be someone your child feels comfortable with.
  - Your child should have permission to leave class if necessary to seek this support.
- □ Agree to talk with the counselor or another adult they trust to figure out which students who they feel safe with and serve as student buddies.
- □ If your child has trouble reporting when they are bullied or harassed, your child could agree to work on their self-advocacy skills.
  - $\hfill\square$  You should ask if your school has a program that helps students with self-advocacy.
  - □ If your student has a disability or you think they could have a disability, you can ask for a Functional Behavioral Assessment to help with their ability to report bullying and harassment

# THINGS YOU CAN DO

- □ Agree to report any bullying or harassment to the school.
  - If you have had trouble getting in touch with administrators before, you can ask that the school pick a specific person you should report incidents to.

Take notes each time your child tells you they have been bullied or harassed. Many parents decide to use a notebook or a notes app on their phone to keep these notes organized. Below is a template you could use for your notes.

# Example:

May 15, 2019		
What happened?	Jane called Jon fat and pushed him	
Who did it?	Jane	
Who saw?	Jack, Jon's friend	
Where did it happen?	Recess	
Who did my child tell?	Mr. Johnson	
When did my child tell them?	Later that day	
Describe what injuries your child had.	Cut on elbow	
Describe any medical attention.	School nurse, who gave him Neosporin and	
	a Band-Aid	
Who did you tell?	Principal Jordan	
When did you tell them?	May 15th	
How did you tell them?	The online complaint form	

Template:

Date of Incident		
What happened?		
Who did it?		
Who saw?		
Where did it happen?		
Who did my child tell?		
When did my child tell them?		
Describe what injuries your child had.		
Describe any medical attention.		
Who did you tell?		
When did you tell them?		
How did you tell them?		

# REQUEST FOR A TEAM MEETING TO ADDRESS BULLYING/HARASSMENT

Date

Parent/Guardian Address Parent/Guardian Phone Number

Principal's Name Name of Your Child's School School Address

Dear Principal:

I am the parent of \_\_\_\_\_\_, whose date of birth is \_\_\_\_\_\_.

**Please schedule an IEP Team Meeting** as soon as possible to discuss my child's needs and IEP services. **My child has been suffering in school because of ongoing bullying or harassment that is interfering with their ability to meaningfully progress and participate in school.** [Since the bullying began, my child has been diagnosed with mental health problems related to the bullying / started seeing a therapist.]

In addition to the people who are required under law to attend the IEP Team Meeting, I would like the following people to be present at this meeting:

[teachers or other staff aware of bullying/harassment; staff responsible for students when or where incidents have occurred; therapist or other provider working with the student]

I will be bringing the following people with me to the meeting:

When scheduling the meeting, please be aware of my availability:

[Provide dates or times that you can or cannot meet]

Should you have any questions or problems with this request, please contact me at the following number(s) \_\_\_\_\_\_ or by e-mail at \_\_\_\_\_\_.

Thank you.

Sincerely,

Parent/Guardian Name

cc: Director of Special Education

KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND THAT YOU EMAIL OR HAND-DELIVER THIS LETTER TO THE PRINCIPAL AND MAKE SURE SOMEONE SIGNS FOR IT, OR THAT YOU SEND IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. YOU SHOULD ALSO SEND A COPY OF IT TO YOUR SCHOOL DISTRICT'S OR CHARTER SCHOOL'S SPECIAL EDUCATION DIRECTOR.

# REQUEST FOR INITIAL SPECIAL EDUCATION EVALUATION

Parent/Guardian Address Parent/Guardian Phone Number

Principal's Name Name of Your Child's School School Address

Dear Principal:

I am the parent of \_\_\_\_\_\_, whose date of birth is \_\_\_\_\_. My child has not been doing well in school and I am therefore requesting a comprehensive evaluation to determine whether my child needs special education services, and, if so, what services are needed. I am particularly concerned that the ongoing bullying my child is experiencing is interfering with their ability to meaningfully progress and participate in school. [Since the bullying began, my child has been diagnosed with mental health problems related to the bullying.]

I would like to participate with the school staff to decide what testing is needed and what information about my child should be collected. I'd also like to know when the testing (if any) will be done, and whether any meetings will be scheduled so that I can attend. [As my child has struggled to be able to report the bullying when it occurs, I am requesting that the team consider administering a Functional Behavior Assessment to determine if my child needs assistance with their self-advocacy skills.]

I understand that the evaluation must be completed, and a written report given to me, within 60 calendar days (not including the summer months) of the school district's receipt of the Permission to Evaluate-Consent Form signed by me. [However, because of the severity of the bullying and its impact on my child, I am requesting that you conduct this evaluation on an expedited basis.] Please send me a Permission to Evaluate-Consent Form to sign as soon as possible so that we can begin the process. [Or, I'd like to come to the school and sign the form immediately.]

Should you have any questions or problems with this request, please contact me at the following number(s) \_\_\_\_\_\_ or by e-mail at \_\_\_\_\_\_.

Thank you.

Sincerely,

Parent/Guardian Name

cc: Director of Special Education

KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND THAT YOU EMAIL OR HAND-DELIVER THIS LETTER TO THE PRINCIPAL AND MAKE SURE SOMEONE SIGNS FOR IT, OR THAT YOU SEND IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. YOU SHOULD ALSO SEND A COPY OF IT TO YOUR SCHOOL DISTRICT'S OR CHARTER SCHOOL'S SPECIAL EDUCATION DIRECTOR.

Date

# REQUEST FOR SPECIAL EDUCATION RE-EVALUATION

Parent/Guardian Address Parent/Guardian Phone Number

Principal's Name Name of Your Child's School School Address

Dear Principal:

I am the parent of \_\_\_\_\_\_\_, whose date of birth is \_\_\_\_\_\_\_. I feel that my child is not making progress in his/her special education program. I am particularly concerned that the ongoing bullying my child is experiencing is interfering with their ability to meaningfully progress and participate in school. [Since the bullying began, my child has been diagnosed with mental health problems related to the bullying.] In order to better understand the problem and the type and amount of services that may be needed, I am requesting that my child be reevaluated. [As my child has struggled to be able to report the bullying when it occurs, I am requesting that the team consider administering a Functional Behavior Assessment to determine if my child needs assistance with their self-advocacy skills.]

I would like to participate with the rest of the IEP Team in the review to determine what data and testing is needed. I'd also like to know when the testing will be held and whether any meetings will be scheduled so that I can attend.

I understand that the reevaluation must be completed, and the written Reevaluation Report given to me, within 60 calendar days (not including the summer months) of your receipt of the Permission to Reevaluate-Consent Form signed by me. [However, because of the severity of the bullying and its impact on my child, I am requesting that you conduct this evaluation on an expedited basis.] Please send me a Permission to Reevaluate-Consent Form to sign as soon as possible so that we can begin the process. [Or, I'd like to come to the school and sign the form immediately.]

Should you have any questions or problems with this request, please contact me at the following number(s)\_\_\_\_\_\_ or by e-mail at \_\_\_\_\_\_.

Thank you.

Sincerely,

Parent/Guardian Name

Cc: Director of Special Education

KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND THAT YOU EMAIL OR HAND-DELIVER THIS LETTER TO THE PRINCIPAL AND MAKE SURE SOMEONE SIGNS FOR IT, OR THAT YOU SEND IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. YOU SHOULD ALSO SEND A COPY OF IT TO YOUR SCHOOL DISTRICT'S OR CHARTER SCHOOL'S SPECIAL EDUCATION DIRECTOR.

Date
# ORGANIZATIONS FOR FURTHER ASSISTANCE

Region	Organization	Contact Information
Pennsylvania	Education Law Center PA	www.elc-pa.org
		Philadelphia Office
		1315 Walnut Street, 4th Floor
		Philadelphia, PA 19107
		215-238-6970
		Pittsburgh Office
		429 Fourth Avenue, Suite 702
		Pittsburgh, PA 15219
		412-258-2120
School	The Office of Safe Schools	The School District of Philadelphia
District of	Advocate	440 N. Broad Street, Suite 1198
Philadelphia		Philadelphia, PA 19130
		1-877-730-6315
		https://www.pccd.pa.gov/ossa/
	FOR STUDENTS WITH	DISABILITIES
Pennsylvania	Disability Rights Pennsylvania	The Philadelphia Building
	(DRP)	1315 Walnut St., Suite 500
		Philadelphia, PA 19107–4798
		(215) 238-8070 (Philadelphia)
		(717) 236-8110 (Harrisburg)
		(412) 391-5225 (Pittsburgh)
		http://www.drnpa.org
Pennsylvania	The Parent Education and	1119 Penn Avenue Suite 400
	Advocacy Leadership Center	Pittsburgh, PA 15222
	(PEAL)	P: 412-281-4404 (Pittsburgh)
		P: 215-567-6143 (Philadelphia)
		P: 866-950-1040 (Toll Free)
		https://pealcenter.org/families/
Pennsylvania	The Arc of Pennsylvania	Pennsylvania Place Ste. 403
		301 Chestnut Street
		Harrisburg, PA 17101-2535
		P: (717) 234-2621
		info@thearcpa.org;
		http://www.thearcpa.org
Philadelphia	The Arc of Philadelphia	2350 West Westmoreland Street
_		Philadelphia, PA 19140
		http://arcphiladelphia.org
		P: (215) 229-4550
		Email: contact@arcpddc.org
Philadelphia	Parents Involved Network	1211 Chestnut Street, 11th Floor
*	(PIN)	Philadelphia, PA 19107
		P: 267-507-3860
		Toll Free: 800-688-4226 ext.: 3860

# LETTER REQUESTING A BULLYING/HARASSMENT INVESTIGATION

Parent/	Guardian Name:			
Addres	SS:			
City: _		State:	Zip Code:	
Phone:		Email:		
Today	's Date			
Princip	oal's Name			_
Addres	ss:		7' 0 1	
City: _		State:	Zip Code:	
Dear P	rincipal		,	
I am th	e parent of		, whose bi	irthdate is
respon	se from the school d enced in severe, perv	istrict to ensure that		The harassment my child has ent occurred [insert dates or time
The ha	rassment took place	in [insert where the	harassment occurred]	
perpeti	rators, the actions the	ey took, and the word	ds they used]	ncluding the name(s) of the
Witnes	sses of the harassme	nt include [insert nar	nes of anyone who saw yo	our child being harassed]
		negative effect on m ply and provide desc	•	result of this harassment my
	been doing worse a	academically:		
	avoided school and	l/or certain classes: _		

# LETTER REQUESTING A BULLYING/HARASSMENT INVESTIGATION

experienced psychological symptoms (depression, anxiety, PTSD):

□ felt uncomfortable and/or refrained from participating in class or extracurriculars:

□ withdrawn or considered withdrawing from your school \_\_\_\_\_

□ Other:\_\_\_\_\_

The harassment is related to my child's membership in a protected class, specifically [provide description of which protected classes apply and how you know that is why your child is being targeted]:

I request that the school interview all persons who were involved in or who witnessed the harassment. After the investigation, please intervene with the student(s) responsible in order to ensure that the harassment stops.

Should you have any questions about this request, please contact me at [phone number/email]

Sincerely,

Parent/Guardian Name

Check and fill out the following information if the parent is a *non-native English speaker* 

□ I have limited English proficiency. I am requesting that the District provide translation and interpretation services for all information related to this allegation of bullying. Please provide these services in [insert language]\_\_\_\_\_

\* KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND HAND DELIVERING THIS LETTER OR SENDING IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. YOU SHOULD SEND A COPY TO THE SUPERINTENDENT AS WELL.

# APPEAL OF A DECISION IN THE SCHOOL DISTRICT OF PHILADELPHIA

To appeal a decision from the School District of Philadelphia, use the form at this link: <u>https://www.philasd.org/studentrights/wp-content/uploads/sites/67/2019/05/SY18-19-</u>Procedures-for-Appeal-Process-Form.pdf

The same form, with Procedures for Appeal Process instructions, follow on the next 4 pages.

For other school districts, please see the following pages for a generic Letter to Appeal a Decision from a Bullying/Harassment Investigation

# **PROCEDURES FOR APPEAL PROCESS**

#### I. PURPOSE:

To provide procedures and general guidelines for the appeal process in the School District of Philadelphia. These processes are applicable for decisions made at both the school level and the central office level.

## II. RESPONSIBILITY:

The Office of Student Rights and Responsibilities is responsible for reviewing and investigating decisions made by school and/or central office staff to determine if the decision was made in accordance with school district policies, procedures, and protocols.

## III. DECISIONS THAT CAN BE APPEALED:

- 1. Disciplinary transfers- transfers made pursuant to a disciplinary hearing
- 2. Programmatic transfers- transfers for programmatic reasons such as special education, 504 service agreements, or English language learner issues
- 3. Neighborhood school transfers- transfers back to a neighborhood school at the end of a school year for reporting inaccurate residency information to the school, moving out of the neighborhood catchment, or gaining admission to a school without an approved transfer through a district approved process or procedure. (special admission schools only)
- 4. School selection- assignments made after the parent completed the school selection process. We will not reconsider wait list decisions or a disapproval to a school because the applicant does not meet the designated criteria for that school.

\*English Learners - All student Advocacy Folders for English learners must contain supporting documentation that demonstrates the student can participate successfully given reasonable accommodations. Office of Multilingual Curriculum and Programs will review all of those students who have been disapproved to ensure that the supporting documents have been thoroughly considered by the school regarding the reasonable accommodations the school must provide in order for the student to be successful.

- 5. Homelessness designation- transfer to a new school based on student's new address (dispute about whether a student is homeless)
- 6. Parental exclusion letters- parent is banned from a school building as a result of inappropriate behavior
- 7. Bullying/harassment findings- after the school administrator investigates an allegation of bullying or harassment, the parent disputes the findings of that investigation

#### IV. CRITERIA:

In all appeals, the factors that the Student Rights and Responsibilities Staff will consider include, but are not limited to:

- 1. Whether the parent met with the school administrator at their child's school
- 2. Whether all policies and procedures were followed
- 3. Whether the child's rights were violated

- 4. The health, safety and welfare of the child and the school community.
- V. PROCESS FOR APPEALS
  - 1. Once a parent receives a decision that is made at the school level, the parent MUST first meet with the Principal/Principal's designee to discuss the decision. If a parent disagrees with the school's decision, the Principal/Principal's designee will inform the parent how to file an appeal.

The following decisions are made at the school level:

- 1. Homelessness designation
- 2. Parental exclusion letters
- 3. Neighborhood school transfers
- 4. Bullying/Harassment findings

If a parent disagrees with a central office decision based on the criteria listed above, the central office staff will inform the parent how to file an appeal.

The following decisions are made at the central office:

- 1. Programmatic transfers
- 2. School Selection
- 3. Disciplinary Transfers
- 2. How to file an appeal

For all matters listed above, parents must complete the attached form and submit it within <u>15</u> calendar days of the decision to the Office of Student Rights and Responsibilities either in person at 440 N. Broad Street, Floor 2, and/or by email (parentappeals@philasd.org), along with all relevant documentation received from the school or the central office that made the decision.

In all appeals, a staff member in the Office of Student Rights and Responsibilities will review the form and accompanying documentation. If further documentation is required to make a decision, it will be requested from the school or central office that made the decision.

Once all of the documents have been received, the staff member will review all materials and make a decision within 21 calendar days. There will be no hearing scheduled and the decision will be made based upon the documentation submitted. The parent and the school will be notified of the decision. The Assistant Superintendent and/or relevant central office departments will also be notified of the decision.

#### VI. RELATED POLICIES

- 118: Code of Student Conduct
- 206: Assignment within the District
- 248: Unlawful Harassment
- 249: Bullying/Cyberbullying
- 251: Homeless Students

EFFECTIVE DATE: August 27, 2018

# APPEAL FORM

Parents and guardians of school district students have the right to appeal decisions made at the school or central office level, as outlined in the attached procedures. In order to complete an appeal, complete both pages of this form and submit it, in person, at 440 N. Broad Street, Suite 243, or by email to <u>parentappeals@philasd.org</u>

Date:	
Parent/Guardian Name:	
Address:	Zip Code
	Additional Number:
Parent email address:	
Name of Student:	Student DOB:
Name of Current School:	Current Grade:
Student Identification #:	

#### Does your child currently receive any of the following supports? (Check appropriate box)

- **5**04 Service Agreements
- ☐ Individualized Education Plan (IEP)
- □ School Therapeutic Services (STS)
- English Language Learners (ELL)

## Please check the type of decision you are appealing:

- Disciplinary Transfer
- Programmatic Transfers
- □ Neighborhood School Transfers
- □ School Selection
- Homelessness Designation
- Parental Exclusion Letters
- Bullying/Harassment Findings

Name of the Office or Person who made the decision (include a copy of the letter you received):

What decision was made?

What outcome are you seeking?

**Note:** To complete this appeal, attach all documentation that supports the outcome you are seeking (For example, school selection requests should include the 7<sup>th</sup> grade report card and standardized test scores).

# APPEAL OF A DECISION FROM BULLYING/ HARASSMENT INVESTIGATION (OTHER DISTRICTS)

Today's Date	_			
Parent/Guardian Name:				
Address:				
City:	_State:	Zip Code:		
City: Phone:	_Email:			
Name of Student:				
Student date of birth:	5	Student Curren	t School:	
Current Grade: Student ID				
Dear Compliance Officer:				
I am the parent ofschool:			, who receives the fo	llowing supports in
□ 504 Service Agreements				
□ Individualized Education				
□ School Therapeutic Serv	( )			
English Language Learn	· · · ·			
I am appealing the decision of n	ny school's j	principal as a r	esult of an investig	ation into

I am appealing the decision of my school's principal as a result of an investigation into bullying/harassment. As a result of the investigation, the principal decided

I disagree with the principal's decision because

As a result of this appeal, I would like

Should you have any questions about this request, please contact me at [phone number/email]

I am attaching the following documents that support my appeal:

Sincerely,

Parent/Guardian Name

KEEP A COPY OF THIS LETTER FOR YOUR RECORDS. WE RECOMMEND THAT YOU EMAIL OR HAND-DELIVER THE APPEAL TO THE COMPLIANCE OFFICER AND MAKE SURE SOMEONE SIGNS FOR IT, OR THAT YOU SEND IT BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. ATTACH ANY DOCUMENTS INCLUDING MEDICAL RECORDS, TEXTS, EMAILS, SCREENSHOTS, ETC., THAT SUPPORT YOUR POSITION.

# General advice:

- Register to speak before the meeting
- Ask how long speakers are allowed to speak at meetings and keep your remarks to that length
- Make sure to describe:
  - What school your child goes to
  - How long the bullying or harassment has been going on
  - How often your child is bullied or harassed
  - Any names the bullies called your child or things they did to your child that would show the Board how serious this is
  - How the bullying or harassment has hurt your child
  - How you tried to get the school to take action
  - What you would like the Board to help you with
- It is not necessary to name the students targeting your child in any public statements. You can tell the Board members privately after your public testimony.

# Example:

My name is John Doe, and my child is a student at Neighborhood Elementary. I am speaking tonight because my child has been terribly bullied since April 10<sup>th</sup>, and the school administration hasn't done enough to stop it.

The bullying started with another student tripping my son in class, and since then it has only continued and gotten worse. Multiple times a week, my son is called "fat" or "gross" and is hurt by this bully. The bully has even gotten other students to start harming my son, and one of the new bullies pushed my son so hard into his locker that he got a concussion.

The bullying has had a terrible impact on my son. He has stopped going to Drama Club because he knows the bullies are there and he is starting to feel bad about himself and believe what the bullies are saying.

I have emailed the principal about the bullying more than ten times, and each time she only says she will look into it and talk to the bullies. But that is not doing enough to protect my child, because talking to the bullies hasn't stopped them and it keeps getting worse.

I am speaking tonight in hopes you can make the administration at Neighborhood Elementary finally take my child's bullying seriously.

#### PHILADELPHIA COMMISSION ON HUMAN RELATIONS



# PUBLIC ACCOMMODATIONS DISCRIMINATION INTAKE FORM

# **INSTRUCTIONS**

This packet contains the form you will need to complete to begin the process of filing a discrimination complaint with our office. You can also download and print this form from our website: <u>www.phila.gov/humanrelations</u>. The form asks for some of the basic information that we need to decide whether or not we can investigate your public accommodations-related problem. If you have difficulty understanding these instructions or have questions, our staff can assist you.

The **Public Accommodations Discrimination Intake Form** asks questions about why you believe you were treated unfairly and how you believe this treatment was against the law. In Philadelphia, the law protects individuals against unfair treatment in public accommodations on the basis of:

- ✓ Ancestry
- ✓ Color
- Disability
- Domestic and Sexual Violence
- ✓ Ethnicity
- ✓ Familial Status
- ✓ Gender Identity

- Marital Status
- National Origin
- ✓ Race
- ✓ Religion
- Retaliation for Prior Discrimination Complaint
- Sex (including breastfeeding)
- Sexual Orientation

#### The PCHR Cannot Investigate Public Accommodations Complaints Based on General Mistreatment

There are many reasons people are treated unfairly, and several of these reasons may not be against the law. The PCHR can only investigate public accommodations complaints based on illegal mistreatment relating to the factors identified above. By law, we cannot handle general public accommodations-related concerns based on any other factors. In addition, your complaint should relate to mistreatment that affected you personally. You cannot file a complaint about the treatment of someone else unless you have the legal right to represent that person (*e.g.*, because you are the person's parent or guardian).

#### **Evidence Is Required To Support Your Discrimination Complaint**

In addition to the statements you make about why you believe you were mistreated, the PCHR will need information from other people and from documents to investigate your complaint. The Public accommodations Discrimination Intake Form includes questions about the people and documents that might help prove that any mistreatment you experienced was against the law. To be most useful to your complaint, the people you identify generally should have direct knowledge (have learned through their own senses) of how you were treated and/or some information about how your treatment compared to that of other people. The most helpful documents will be ones written around the time that you believe you were mistreated.

<u>Complete the attached form only if you believe you have been discriminated against because of one of the bases listed above</u>. Please take the time to answer all questions completely and accurately. Once you have completed the form, please submit the form in person or by mail to our office:

#### Philadelphia Commission on Human Relations

The Curtis Center 601 Walnut Street, Suite 300 South Philadelphia, PA 19106 Phone: 215-686-4670 TTY: 215-686-3238

Once we have received your completed form, our intake staff will meet with you about filing a complaint. <u>Completing the enclosed</u> form does not mean you have filed a discrimination complaint. <u>A PCHR staff person will review your form and meet with you to</u> decide if we can assist you. Preparing and filing a discrimination complaint is a complex matter. Please plan for the process to take at least 2 hours.

#### SPECIAL INSTRUCTIONS IF THE DISCRIMINATION WAS 9 OR MORE MONTHS AGO:

The Philadelphia Commission on Human Relations can only investigate discrimination that occurred within the past 300 days. If your complaint involves events that occurred more than 9 months ago, please contact our office immediately. If you fail to complete all of the steps for filing a complaint within the legal time period, our staff will not be able to investigate your complaint.



#### PHILADELPHIA COMMISSION ON HUMAN RELATIONS

# PUBLIC ACCOMMODATIONS DISCRIMINATION INTAKE FORM

#### Please provide your personal information. 1.

First Name		Last Name	
Street Address (Include Apartment or Unit #)		City	
State	Zip Code	Email Address (if available)	
Home Phone		Work Phone	
Cell Phone		Date of Birth	
<ul> <li>Are you filing this compliant for someone else?  Yes</li> <li>a. If yes, who do you believe was discriminated against?</li> </ul>			
First Name		Last Name	
Relationship To You			

#### 3. What organization (e.g., store, restaurant, City government agency) do you believe has discriminated?

Street Address		City	
		,	
State	Zip	Phone	
Owner Name			Phone

#### What is the reason (basis) for your discrimination complaint? 4.

FOR EXAMPLE: If you feel you were tr	eated worse than someone else because of race, y	you should check the box next to Race. If
you feel you were treated worse for severa	al reasons, such as your sex, religion and national	l origin, you should check all that apply.
1 Ancestry	Marital Status	

- Ancestry
- Color (e.g., difference in skin shade within same race)
- Disability

Organization

- Domestic and Sexual Violence
- Ethnicity
- Familial Status
- Gender Identity
- Other (explain):

- Marital Status
- National Origin
- Race
- Religion
- Retaliation for Prior Discrimination Complaint
- □ Sex (including breastfeeding)
- Sexual Orientation
- For each category above, please state how you identify yourself. For example, if you checked sex, please indicate whether 5. you are male or female.

# 6. What happened to you that you believe was discriminatory? Please attach additional pages if needed. Date Action (Ex. I was denied service) Name/Title of Person(s) Responsible

7.	Why do you believe	these actions were	discriminatory?	Please attach additiona	l pages if needed.
----	--------------------	--------------------	-----------------	-------------------------	--------------------

8. What reason(s) were you given for the acts you consider discriminatory? By whom? His or her job title?

9. Why do you believe the reason(s) given to you are false?

10. Describe who was in the same or similar situation as you and how they were treated. For example, who else requested service from the establishment? Provide the basis identified in Question 5 of these individuals, if known, and if it relates to your claim of discrimination. For example, if your complaint alleges race discrimination, provide the race of each person; if it alleges sex discrimination, provide the sex of each person; and so on. Use additional sheets if needed.

a. Of the persons in the same or similar situation as you, who was treated better than you?

Full Name Basis		Basis	Description of Treatment

#### b. Of the persons in the same or similar situation as you, who was treated *worse* than you?

Full Name	Basis	Description of Treatment	

c. Of the persons in the same or similar situation as you, who was treated as *same* as you?

Full Name Basis		Description of Treatment

Answer Questions 11-13 only if you are claiming discrimination based on disability. If not, skip to Questions 14-20. Please state if you have more than one disability. Please add additional pages if needed.

Please check all that apply:

Yes, I have a disability

I do not have a disability now, but I did have one

I do not have a disability, but the organization treats me as if I am disabled

11. What is the disability that you believe is the reason for the adverse action taken against you? Does this disability prevent or limit you from doing anything (*e.g.*, lifting, sleeping, breathing, walking, caring for yourself, working, etc.)? If so, how does this disability affect you?

- 12. Do you use medications, medical equipment or anything else to lessen or eliminate the symptoms of your disability?
  - a. If yes, what medication, medical equipment or other assistance do you use?

#### 13. Did you ask the organization for any changes or assistance to the establishment because of your disability? [Yes]No

a.	If yes, please state when you asked, how you asked, who you asked, what changes or assistance you requested and how
	the organization responded to your request.

Date	Verbal or Written	Name/Title of Person(s) Asked	Changes or Assistance	Organization Response
	Request?		Requested	

#### 14. Are there any witnesses to the alleged discriminatory incidents?

a. If yes, please identify them below and describe what they will say. (Please attach additional pages if place	needed.)
---	----------

Full Name	Address & Phone Number	What This Person Will Say

#### 15. Are there any documents about the alleged discriminatory incidents? Yes No

a.	If yes, please identify	them below and indicate from	whom we might obtain them.
----	-------------------------	------------------------------	----------------------------

Document	Source of Document

# 16. Have you filed a complaint on this matter with the Pennsylvania Human Relations Commission or another agency? Yes No If yes, please indicate the agency and date of filing:

Agency	Date of Complaint(s)
Pennsylvania Human Relations Commission	
Other (explain):	

# 17. Have you sought help about this situation from an attorney, or any other source? a. If yes, please provide the name of the organization, the name of person you spoke with, the date of contact, and results if any

results, ir any.			
Organization	Person You Spoke With	Date of Contact	Results

#### 18. If we cannot reach you directly, is there someone we can contact to help us reach you?

First Name		Last Name
Street Address (Include Apartment or Unit #)		City
State	Zip Code	Email Address (if available)
Home Phone		Other Phone
Relationship to You		

19. Please check one of the boxes below to tell us what you would like us to do with the information you are providing on this questionnaire. If you would like to file a discrimination complaint, you must do so within 300 days from the day you knew about the discrimination. If you do not file a complaint within the time limits, you will lose your rights. If you would like more information before filing a complaint or you have concerns about PCHR's notifying the organization about your complaint, you may wish to check Box 1. If you want to file a complaint, check Box 2.

**<u>BOX 1</u>** I want to talk to a PCHR employee before deciding whether to file a complaint. I understand that by checking this box, I have not filed a complaint with the PCHR. I also understand that I could lose my rights if I do not file a complaint in time.

**BOX 2** I want to file a complaint of discrimination, and I authorize the PCHR to look into the discrimination I described above. I understand that **the PCHR must give the organization that I accuse of discrimination information about the complaint, including my name.** I also understand that the PCHR can only accept complaints of public accommodations discrimination based on ancestry, color, disability, domestic and sexual violence, ethnicity, familial status, gender identity, marital status, national origin, race, religion, retaliation for prior discrimination complaint, sex or sexual orientation.

**20.** If you checked Box 2 above, what would you like to have happen in response to your complaint? (Ex. use of the establishment, receipt of service requested, guarantee of no future discrimination)

I declare under penalty of perjury that all of the information that I have provided on this form is true, correct, and complete to the best of my knowledge. I acknowledge that false statements on this form are punishable under state law, 18 Pa. C.S. § 4904 (unsworn falsification to authorities).

Signature

**Today's Date** 



# PENNSYLVANIA HUMAN RELATIONS COMMISSION EDUCATION DISCRIMINATION QUESTIONNAIRE

# 1. YOUR CONTACT INFORMATION (Student and parent or guardian\*)

Student Name & Birthdate				
Address		Date of Birt	h	
Add(C33	Street	Apt.		
City	State	Zip Coo	le	
Phone Number: (H)		(Cell)		
(W)	May we call you	at work? Ses	🗌 No	
E-mail address:				
Parent or Guardian Name(*if	filing on behalf of minor stu	ident)		
Address				
	Street	Apt.		
City	State	Zip Coo	le	
Phone Number: (H)		(Cell)		
(W)	May we call you	at work? 🗌 Yes	🗌 No	
E-mail address:				
Name, address and phone nu to contact you:	mber of a person, who do	bes <b>NOT</b> live with you	ı and will knov	v how
Name	Phone N	umber		
Address				
	Street	Apt.		
City	State	Zip Coo	je	
E-mail address:				
2. AGAINST WHAT SCHOO (preschool, k-12 sch	L OR INSTITUTION AR ool, college, university			)
School/institution Name				
Address in PA			PA	
Street		City		p Code

Type of school (preschool, K-12, college, university, trade or technical school, etc.)

Name & title of top school official(s) (principal, superintendent, college president, etc.)

Pennsylvania county where you were harmed:

# 3. DESCRIBE HOW YOU WERE HARMED, AND WHEN, SO WE CAN DETERMINE IF WE CAN ASSIST YOU.\* Check all that apply.

**Write the date(s)** you were harmed beside the discriminatory event or action:

Admission denied	Re-admission denied
Expulsion	Suspension
Privilege denied	Other discipline
Inappropriate placement (in gifted or special	education)
Inappropriate grades	Other different treatment
<ul> <li>Harassment</li></ul>	bility

# \*PLEASE ATTACH COPIES OF ANY DOCUMENTS SUCH AS A REPORT CARD, NOTICE, LETTER, ETC. TO BACK UP WHAT YOU ARE SAYING.

# 4. DO YOU FEEL YOU WERE TREATED DIFFERENTLY (DISCRIMINATED AGAINST) BECAUSE OF ANY OF THE CHARACTERISTICS BELOW?

The commission can investigate your complaint only if you believe you were treated differently and harmed because of your race, color, religion, ancestry, sex, national origin, disability or the use, handling or training of a guide or support animal for blindness, deafness or physical disability. For example, if you feel you were treated worse than someone else because of your race, please indicate race as the reason. If you believe you were treated differently because of your race and sex, please check off both race and sex. **Only check those reasons which explain why you were harmed**. Also, please identify your race, color, religion, national origin or ancestry, etc. **if** you were discriminated against based on those factors.

🛛 Male 🛛 🖾 Female 🖾 Pregnant

Race	Color
Religion	Ancestry
National Origin (country in which you wer	re born)
Association with a person of a different ra	ace than your own:
Your race	_ the other person's race
$\Box$ Use of a guide or support animal for disa	ability (please complete #6)
Handling or training of a support animal	for disability (please complete #6)
Other (please specify)	
$\Box$ I have a disability. (please complete #6) $\Box$ I had a disability in the past. (please con	The teacher, etc. treats me as if I am disabled.
	someone who has a disability. (please complete #6)
	complaint about unlawful discrimination, or because pout discrimination, please complete the following
If you filed a complaint with another agency,	, list the agency's name and date of filing:
Date(s) you complained about discrimination and that person's name and title:	n to a teacher, administrator or other school official
Date(s) you assisted someone in complaining	g about discrimination
5. STATE THE REASONS THE TEACHER, ACTIONS THAT HARMED YOU.	ADMINISTRATOR, ETC. GAVE FOR THE
Who told you about the reasoning for the ac	tion? Include his or her position.
When were you told about the action taken a	against you?
	 Date(s)

If you were given no reason, please check here.  $\Box$ 

Regarding how you were harmed, please identify a person or persons who were treated better

than you. For example, you were suspended for the same offense committed by students of a different race or gender and they were punished less harshly.

Name of other person(s) - First and Last

How is this person different from you? For example, what is his or her race, age, religion, etc.?

Please explain **exactly** how this person was treated better or differently than you. Include dates.

If you cannot identify someone who was treated better or differently than you, you need to describe an incident, statement, *etc.* which can be investigated, and which directly relates to why you were treated differently than someone else.

# 6. IF YOU CHECKED ONE OF THE FOUR DISABILITY CATEGORIES NOTED IN #4 ABOVE, ANSWER THE FOLLOWING QUESTIONS. (IF NOT, SKIP TO #8)

What is your disability?		
How long have you had this disability and when did it start?		
Do you still have this disability?  U yes  no		
If yes, how much longer do you expect to have the disability?		
What major life activities do <b>you have great difficulty performing</b> because of your disability (Check all that apply.)		
Seeing Hearing Bending Walking Lifting Stooping Turning		
Climbing Running Talking Standing for long periods		
Sitting for long periods Caring for yourself Thinking Concentrating		
Relating to Others		
Other Major Life Activities ( <b>Be specific</b> )		
If you have had a disability in the past, when did it start, and what date did it end?		
If a teacher, school employee, etc. treats you as if you are disabled: What disability do they think or believe you have?		

Who are the people that are treating you as disabled (names and positions)?

Why do you	think that these	people think or	believe you	have a disability?
------------	------------------	-----------------	-------------	--------------------

How did the teacher, school employee, etc. learn about your disability?
On what date did they learn about your disability?
Which specific person learned about your disability? (include his or her position or title)
If you are related to someone who has a disability, what is your relationship to this person?
What is this person's disability?
How and on what date did the school staff or faculty learn about this person's disability?
Did you ask for an accommodation or assistance?  yes no IF YES, (1) To whom did you make your request?
<ul> <li>(1) To whom did you make your request?</li></ul>
<ul> <li>(2) On what date was the request made?</li> <li>(3) Please describe the accommodation or assistance you requested, and why.</li> </ul>
Did the school provide the requested accommodation or assistance? $\Box$ yes $\Box$ no
If so, on what date?
If not, were you provided with some other accommodation or assistance instead? $\Box$ yes $\Box$ no
Did the school deny your request for an accommodation or assistance?
yes no
If so, who denied your request?
What date was the request denied?
What reason was given to you for the denial?

# 7. IF YOU WERE DENIED ACCESS BECAUSE OF A DISABILITY, PLEASE DESCRIBE THE INACCESSIBLE FACILITY OR SERVICE, IN ADDITION TO COMPLETING QUESTION 6.

What service, facility or area was not accessible, and how? (*Be as specific as possible, for example: entrance was not accessible because of stairs, doorway/aisles too narrow for wheelchair, assistive device, alternate format for visual disability or sign language interpreter refused, no accessible parking, etc.*)

# 8. IF YOU WERE DENIED ACCESS OR PARTICIPATION FOR A REASON OTHER THAN DISABILITY, PLEASE DESCRIBE THE INACCESSIBLE FACILITY, PROGRAM OR SERVICE AND HOW IT WAS NOT ACCESSIBLE.

What service, facility or program was not accessible, and how? (Be as specific as possible, for example: participation in xx program denied because of your sex.)

# 9. IF YOU CHECKED THAT YOU WERE HARASSED UNDER #3, ANSWER THE FOLLOWING QUESTIONS AS COMPLETELY AS POSSIBLE.

Name the person(s) who harassed you:

His or her position or title (teacher, school employee, fellow student, etc.)

When were you harassed: Starting d	late Ending date
When were you hardssed. Starting a	Enang dute
Is the harassment still continuing?	] yes 🔲 no
How often did the harassment occur?	As well as possible, please indicate date, month and
year of each incident and how often t	he harassing actions occurred.
One time only	Once a day
Several times daily	
multiple times/week	
multiple times/month	
Please provide two or three examples	of the harassment you experienced.

Did you consider any of the above acts of harassment to be especially severe and/or offensive?
Yes No If so, please explain why.
Did the harassment have a negative or harmful effect on you or your health? If so, please explain:
Did you complain to anyone about the harassment?  Yes No To whom did you complain? Name Position or title
Name Position or title
What date did you complain?
Did the harassment stop after you complained about it? $\square$ Yes $\square$ No
If it ended, on what date did it stop?
After you complained, were any other actions taken against you? (for example – lower grades, increased discipline, etc.) $\Box$ Yes $\Box$ No
What were the actions?
On what dates did they occur?
Who took the action against you?
Name Position or title
Did this person know that you complained about the harassment? $\Box$ Yes $\Box$ No
10. IF YOU WERE DENIED AN ACCOMMODATION FOR RELIGION, PLEASE DESCRIBE THE ACCOMMODATION REQUESTED, THE DATE DENIED, AND THE REASON GIVEN FOR DENIAL.
11. IF YOU HAVE FILED THIS COMPLAINT WITH ANY OTHER LOCAL, STATE OR
FEDERAL AGENCY, PLEASE ANSWER THE FOLLOWING:

Name of the agency with which you filed \_\_\_\_\_\_

- 7 -

## 12. HAVE YOU BEEN INVOLVED IN ANY COURT ACTION REGARDING THIS MATTER? (COURT ACTION INITIATED BY YOU OR ANYONE ELSE). IF SO, PLEASE SPECIFY THE COURT AND THE DATE FILED, TO THE BEST OF YOUR MEMORY.

🗌 Yes 🔄 No					
	Court	City	County State	Date filed	

## 13. IF YOU HAVE FILED THIS COMPLAINT WITH ANY OTHER LOCAL, STATE OR FEDERAL AGENCY, PLEASE ANSWER THE FOLLOWING:

Name of the agency with which you filed \_\_\_\_\_\_

Date of filing

Inquiry or Complaint number

# 14. IF YOU WILL HAVE AN ATTORNEY REPRESENTING YOU ON THIS MATTER, PLEASE HAVE YOUR ATTORNEY SEND US A LETTER THAT CONFIRMS THIS. (YOU DO NOT NEED AN ATTORNEY TO FILE A COMPLAINT.)

# YOU MUST SIGN AND DATE THIS FORM BEFORE RETURNING IT.

☐ I hereby verify that the statements contained in this form are true and correct to the best of my knowledge, information and belief. I understand that false statements herein are made subject to the penalties of 18 PA.C.S. Section 4904, relating to unsworn falsification to authorities.

# Signature \_\_\_\_\_

Date \_\_\_\_\_

# IF YOU HAVE OTHER INFORMATION YOU BELIEVE WE NEED TO KNOW TO HELP US UNDERSTAND YOUR COMPLAINT, PLEASE PROVIDE IT BELOW. FEEL FREE TO ATTACH ADDITIONAL PAGES TO DESCRIBE WHAT HAPPENED TO YOU.



# United States Department of Education Office for Civil Rights

# **DISCRIMINATION COMPLAINT FORM**

You do not have to use this form to file a complaint with the U.S. Department of Education's Office for Civil Rights (OCR). You may send OCR a letter or e-mail instead of this form, but the letter or e-mail must include the information in items one through nine and item twelve of this form. If you decide to use this form, please type or print all information and use additional pages if more space is needed. An on-line version of this form, which can be submitted electronically, can be found at: <u>http://www.ed.gov/about/offices/list/ocr/complaintintro.html</u>.

Before completing this form please read all information contained in the enclosed packet including: Information About OCR's Complaint Resolution Procedures, Notice of Uses of Personal Information and the Consent Form.

1. Name of person filing this complaint:

Last Name:	First Name:		_ Middle Name:	
Address:				
City:		_State:	Zip Code:	
Home Telephone:		_ Work Telep	hone:	
E-mail Address:				

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name:	_ First Name:	_ Middle Name:
Address:		
City:	State:	Zip Code:
Home Telephone:	Work Telep	hone:
E-mail Address:		

Page 2 of 12 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name	of Institution:	
Addre	ess:	
City:_	State: Zip Cod	e:
Depa	rtment/School:	
4.	The regulations OCR enforces prohibit discrimination on the banational origin, sex, disability, age or retaliation. Please indicate complaint:	
	Discrimination <b>based on race (specify)</b>	
		_
	Discrimination <b>based on color (specify)</b>	-
	Discrimination <b>based on national origin (specify)</b>	-
		-
	Discrimination <b>based on sex (specify)</b>	-
		-

Page 3 of 12 – U.S. Department of Education, Office for Civil Rights	Discrimination
Complaint Form, Consent Form, and Complaint Processing Procedur	es

	Discrimination <b>based on disability (specify)</b>	
	Discrimination <b>based on age (specify)</b>	
	Retaliation because you filed a complaint or asserted your righ	ts (specify)
	Violation of the Boy Scouts of America Equal Access Act (specify	y)
5.	Please describe each alleged discriminatory act. For each action, p date(s) the discriminatory act occurred, the name(s) of each persor why you believe the discrimination was because of race, disability, a please provide the names of any person(s) who was present an act(s) of discrimination.	n(s) involved and, age, sex, etc. Also

Page 4 of 12 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

6. What is the most **recent date** you were discriminated against?

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

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

I am requesting a waiver of the 180-day time frame for filing this complaint. Please explain why you waited until now to file your complaint.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

\_\_\_\_\_

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:\_\_\_\_\_

**YES** 

Date Filed:	
-------------	--

Case Number or Reference: \_\_\_\_\_

**Results of Investigation/Findings by Agency or Court:** 

)NO

Page 5 of 12 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Last N	lame:	First Name:	Middle Name:	
Home	Telephone	Wor	k Telephone:	
11.	What would you remedy are you se		lo as a result of your comp	laint — what
12.	We cannot accept your complaint be	-	as not been signed. Please	sign and date
	(Date)	(Signature)		

(Date)

(Signature of person in Item 2)

Please mail the completed and signed Discrimination Complaint Form, your signed consent form and copies of any written material or other documents you believe will help OCR understand your complaint to the OCR Enforcement Office responsible for the state where the institution or entity about which you are complaining is located. You can locate the mailing information for the correct enforcement office on OCR's website at <a href="http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm">http://wdcrobcolp01.ed.gov/CFAPPS/OCR/contactus.cfm</a>.

#### **CONSENT FORM - FOR REVEALING NAME AND PERSONAL INFORMATION TO OTHERS**

(Please print or type except for signature line)

#### Your Name:

# Name of School or Other Institution That You Have Filed This Complaint Against:

- This form asks whether the Office for Civil Rights (OCR) may share your name and other personal information when OCR decides that doing so will assist in investigating and resolving your complaint.
- For example, to decide whether a school discriminated against a person, OCR often needs to reveal that person's name and other personal information to employees at that school to verify facts or get additional information. When OCR does that, OCR informs the employees that all forms of retaliation against that person and other individuals associated with the person are prohibited. OCR may also reveal the person's name and personal information during interviews with witnesses and consultations with experts.
- If OCR is not allowed to reveal your name or personal information as described above, OCR may decide to close your complaint if OCR determines it is necessary to disclose your name or personal information in order to resolve whether the school discriminated against you.

**NOTE**: If you file a complaint with OCR, OCR can release certain information about your complaint to the press or general public, including the name of the school or institution; the date your complaint was filed; the type of discrimination included in your complaint; the date your complaint was resolved, dismissed or closed; the basic reasons for OCR's decision; or other related information. Any information OCR releases to the press or general public will not include your name or the name of the person on whose behalf you filed the complaint.

**NOTE**: OCR requires you to respond to its requests for information. Failure to cooperate with OCR's investigation and resolution activities could result in the closure of your complaint.

# Please sign section A or section B (but not both) and return to OCR:

- If you filed the complaint on behalf of yourself, you should sign this form.
- If you filed the complaint on behalf of another specific person, that other person should sign this form.

**EXCEPTION**: If the complaint was filed on behalf of a specific person who is younger than 18 years old or a legally incompetent adult, this form must be signed by the parent or legal guardian of that person.

- If you filed the complaint on behalf of a class of people, rather than any specific person, you should sign the form.
- A. I <u>give</u> OCR my consent to reveal my identity (and that of my minor child/ward on whose behalf the complaint is filed) to others to further OCR's investigation and enforcement activities.

Signature

Date

B. I <u>do not</u> give OCR my consent to reveal my identity (and that of my minor child/ward on whose behalf the complaint is filed) to others. I understand that OCR may have to close my complaint.

OR

Signature

Date

I declare under penalty of perjury that it is true and correct that I am the person named above; and, if the complaint is filed on behalf of a minor child/ward, that I am that person's parent or legal guardian. This declaration only applies to the identity of the persons and does not extend to any of the claims filed in the complaint.