



INTERIOR
DESIGNERS
INSTITUTE

IDI
1061 Camelback St., Newport Beach, CA 92660
949-675-4451

TITLE IX FORMAL COMPLAINT FORM

Instructions for completing this form: If you believe you have been the victim of sexual harassment, please complete this form, sign where indicated below, and submit it in person, email, or U.S. mail using the contact information listed for the Title IX Coordinator for students at IDI. Please **read** the entire form before completing.

This formal complaint form is intended to be used by the alleged victim of Title IX sexual harassment, referred to as the “complainant”. Under Title IX and Family Educational Rights and Privacy Act or FERPA, a parent or legal guardian may sign a complaint form and otherwise act on behalf of a minor in the formal complaint process.

If you are completing this form and you intend to report sexual harassment against another person at IDI’s education programs or activities, please report your concern to the Title IX Coordinator so that IDI can take further action. You must report your complaint within **45 days** of its occurrence. **Under federal law, only an alleged victim of sexual harassment who is currently participating or attempting to participate in IDI’s education programs or activities (such as an enrolled student, an employee, or an applicant for employment or admission) has the right to use the formal complaint process to initiate an investigation.** IDI will process all formal complaints in accordance with all legal (Department of Education) and local (Newport Beach) laws.

Please print or type when completing this form:

Name of complainant: _____

Address: _____

Phone number: (____) _____ Email: _____@_____

Is the complainant participating in or attempting to participate in IDI education programs or activity? [] Yes [] No

If you are a parent or guardian, please complete the section below:

Name: _____

Address: _____

Phone number: (____) _____ Email: _____@_____

You have the right to be represented by an advisor during the complaint process. The advisor may be, an attorney, but does not have to be. If you will be represented by an attorney or the advisor in presenting your complaint, please identify the person by providing the information below:

Name: _____

Address: _____

Phone number: (____) _____ Email: _____@_____

Please list and additional individuals you intend to bring with you to any meetings or interviews associated with this complaint by providing their information below, you may add pages as needed:

Name: _____

Address: _____

Phone number: (____) _____ Email: _____@_____

Name: _____

Address: _____

Phone number: (____) _____ Email: _____@_____

- A. Please describe the facts and circumstances of the alleged sexual harassment causing this complaint. *(Give specific, factual details. Attach additional sheets if necessary and indicate how many additional pages will be attached to ensure complete receipt of your complaint.)*

- B. In a Title IX complaint process, the person who is alleged to have committed the sexual harassment is called the respondent. Please provide the name(s) of the person or people you allege to be the “respondent(s)” responsible for the alleged sexual harassment. If applicable, please include the person’s title or position:
- C. When and where did the alleged sexual harassment occur? Please provide the specific dates, times, and locations, if possible.
- D. Please explain how the alleged sexual harassment has impacted you. This could include physical injuries as well as impacts on your ability or benefit from the IDI’s education programs or activities.

E. Please provide the names and contact information of anyone who may have witnessed the alleged conduct.

F. If you have reported these allegations to another person, please state to whom you reported the alleged sexual harassment and provide their contact information (if known).

G. Title IX does not require complainants to attempt to resolve complaints of sexual harassment informally before filing a complaint. Nonetheless, if you have reported these allegations to an IDI employee, please state when, to whom, and what response you received.

H. Please list below any evidence that you believe is relevant to your allegations. This could include audio or visual media, physical objects, online materials, text messages, voicemail, screen captures, emails, or any other item you are attaching or intend to make available for the purpose of this complaint. If known, please also identify any

information in IDI’s possession that you believe to be relevant to your allegations and would like IDI to review (such as emails, or security camera footage).

I. Please provide any other information that would be helpful in IDI’s review of your allegations.

J. Please describe the outcome or remedy you seek for this complaint.

Please provide your physical or digital signature.

Complainant name: _____

Complainant signature: _____

If under 18 years of age, parents name: _____

Signature of parent: _____

Date of filing: _____

If this formal complainant is being signed by the IDI Title IX Coordinator instead of complainant:

Title IX Coordinator name: _____

Title Coordinator signature: _____

Date of filing: _____

Notice to complainant: This document is a legal record of the allegations of sexual harassment that you have reported to IDI in order to request a formal investigation. Please keep a copy of this completed form and any supporting documentation for your records. Please also review your rights and responsibilities at www.idi.edu website under Title IX Disclosures.

Any questions or concerns that you may have during this process may be directed to IDI's Title IX Coordinator.

If after reviewing your complaint, the Title IX Coordinator finds that the allegations are not appropriate for a Title IX sexual harassment formal complaint process, but should be investigated by IDI under a different policy or procedure; your formal complaint form will be forwarded to the appropriate IDI personnel in accordance with IDI policies. You have the right to appeal the dismissal of your complaint.

Please use the contact below for all issues related to Title IX.

IDI Title IX Coordinator

1061 Camelback St.

Newport Beach, CA 92660

Phone: 494-675-4451

Email: TitleIXCoordinator@idi.edu