

### **Selection for Employment and Assignments**

The Cedar Falls Community School District will select for employment qualified applicants for each position without improper discrimination on the basis of race, color, creed, religion, sex, sexual orientation, gender identity, national origin, ethnic background, age, disability, or genetic information. Persons with disabilities who can perform the essential functions of an assignment with or without reasonable accommodations shall be considered qualified applicants. The District shall take affirmative action in the recruitment, appointment, assignment, and advancement of personnel to accomplish the goals of equal employment opportunity. In keeping with the law, the District shall consider the veteran status of applicants.

### **Employment Conditions**

The Cedar Falls Community School District will not unlawfully discriminate against any individual with respect to compensation, terms, conditions, or privileges of employment because of such individual's race, color, creed, religion, sex, sexual orientation, gender identity, national origin, ethnic background, age, disability, or genetic information.

### **Complaints of Discrimination**

Any applicant or employee alleging discrimination on the basis of race, color, creed, religion, sex, sexual orientation, gender identity, national origin, ethnic background, age, disability, or genetic information may follow the complaint procedures set forth in Policy 401.4. The complainant may bypass any step of the complaint procedure where the person to whom the complaint is to be lodged is the alleged perpetrator. The complainant may file the initial complaint with the compliance officer, whose decision may be appealed to the superintendent or designee. Inquiries or complaints may also be directed to federal and state agencies including the Iowa Civil Rights Commission, the Equal Employment Opportunity Commission, and the Office of Civil Rights of the United States Department of Education.

The complainant may be required to complete a complaint form and turn over copies of evidence of discrimination including, but not limited to, recordings, memoranda, letters, and pictures. The investigator shall promptly commence an investigation and proceed to completion. Both the complainant and the alleged perpetrator will be given an opportunity to give a statement. A written investigation report shall be completed, and a summary of the report (including a finding that the complaint was founded, unfounded, or inconclusive) will be forwarded to the complainant and to the alleged perpetrator.

### **Compliance Officer**

The director of human resources shall be designated as the District's compliance officer to insure that applicants and employees are treated in accordance with this policy. In the event the director of human resources is the alleged perpetrator, the director of secondary education shall be the alternate compliance officer. The compliance officer shall also be responsible for coordinating the preparation, implementation, evaluation, and updating of written equal

employment opportunity and affirmative action plans, with systematic input from diverse racial/ethnic groups, women, men, and persons with disabilities.

**Confidentiality**

The right of confidentiality, both of the complainant and of the alleged perpetrator, will be respected to the extent possible consistent with the District's legal obligations to investigate allegations of misconduct and to take corrective action when misconduct has occurred. Complaints of discrimination shall not be filed in the complainant's personnel file.

**No Retaliation**

No person shall retaliate against another person because the person has filed a discrimination complaint, assisted or participated in an investigation, or has opposed language or conduct that violates this policy, as long as the participation or action was done in good faith.

**Corrective Action**

The District will take action to halt any improper discrimination or retaliation and will take other appropriate corrective actions to remedy all violations of this policy. This may include disciplinary measures, including discharge of a perpetrator.

**Notice**

In order to effectively communicate and interpret the District's policy to all levels of the administration and to all other employees, applicants, educational agencies and to the public, a statement of the District's policy shall be distributed to all applicants for employment and shall be disseminated annually to employees, students, parents, and recruitment sources. District employees involved in the hiring or supervision of personnel shall be trained on proper equal employment opportunity procedures.

- Date of Adoption:** June 23, 1975
- Dates of Revision:** December 13, 1976  
March 11, 1985  
May 8, 1989  
June 11, 1990  
December 10, 1990  
August 9, 1993  
September 12, 1994  
April 24, 1995  
November 11, 1996  
October 12, 1998  
July 12, 1999  
September 27, 1999  
November 25, 2002  
July 19, 2004  
August 14, 2006  
September 8, 2008  
August 8, 2011  
April 22, 2013  
August 8, 2016

DISCRIMINATION/HARASSMENT COMPLAINT FORM

Please complete the following as fully as possible. If you need assistance, contact the compliance officer.

Date of Complaint: \_\_\_\_\_

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

Position and Building of Complainant: \_\_\_\_\_

\_\_\_\_\_

Primary Address: \_\_\_\_\_

Primary Telephone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Name and Position of Alleged Perpetrator: \_\_\_\_\_

Discrimination Alleged:

- |  |                           |
|--|---------------------------|
| _____ Race, Color                        | _____ Sexual Orientation  |
| _____ Sex/Gender                         | _____ Gender Identity     |
| _____ Religion, Creed                    | _____ Age                 |
| _____ National Origin, Ethnic Background | _____ Disability          |
| _____ Other _____                        | _____ Genetic Information |

Statement of Discrimination/Harassment: (Include dates, places and persons involved in incidents, if known. List any witnesses, their position and addresses and telephone numbers. Attach any pertinent written documents. Describe any actions you took in response to the incidents.)

I agree that all of the information on this form is given in good faith and is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_

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

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

WITNESS STATEMENT

Date of Interview: \_\_\_\_\_

Interviewer: \_\_\_\_\_

Name of Person Giving Statement: \_\_\_\_\_

Position and Building of Witness: \_\_\_\_\_

\_\_\_\_\_

Primary Address: \_\_\_\_\_

\_\_\_\_\_

Primary Telephone: (    ) \_\_\_\_\_ Email: \_\_\_\_\_

Statement: (Include dates, places and persons involved if known.)

I agree that all of the information on this form is given in good faith and is accurate and true to the best of my knowledge.

Signature: \_\_\_\_\_

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

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

SUMMARY OF DISPOSITION OF DISCRIMINATION/HARASSMENT COMPLAINT

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

Position and Building of Complainant: \_\_\_\_\_

\_\_\_\_\_

Name and Position of Alleged Perpetrator/Respondent: \_\_\_\_\_

\_\_\_\_\_

Date of Initial Complaint \_\_\_\_\_

Nature of Harassment Alleged:

- |       |                                    |       |                     |
|-------|------------------------------------|-------|---------------------|
| _____ | Race, Color                        | _____ | Sex/Gender          |
| _____ | Sexual Orientation                 | _____ | Age                 |
| _____ | Religion, Creed                    | _____ | Disability          |
| _____ | National Origin, Ethnic Background | _____ | Gender Identity     |
| _____ | Other _____                        | _____ | Genetic Information |

Summary of Investigation:

Conclusion: \_\_\_\_\_ Founded (The totality of the evidence reasonably demonstrates the actions occurred and constituted improper discrimination or harassment.)

\_\_\_\_\_ Unfounded (It is reasonable to believe that the actions complained of did not occur, or were not so serious or pervasive as to constitute improper discrimination or harassment.)

\_\_\_\_\_ Inconclusive

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Position

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

Copies to:

\_\_\_\_\_ Complainant

\_\_\_\_\_ Alleged Perpetrator/Respondent

\_\_\_\_\_ Superintendent or Designee