

### **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, national origin, ethnic background, age, disability, or genetic information. The District will provide equal opportunity to all employees and applicants for employment that includes hiring, placement, promotion, transfer or demotion, recruitment, advertising or solicitation for employment, treatment during employment, rates of pay or other forms of compensation, and layoff or termination. 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 in major job categories where women, men, federally designated racial and ethnic minority groups and persons with disabilities are underrepresented. 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, 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 executive director of human resources shall be designated as the District's compliance officer to ensure that applicants and employees are treated in accordance with this policy. In the event the executive director of human resources is the alleged perpetrator, the associate superintendent for teaching and learning 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.

### **Title IX: Discrimination and Harassment Based on Sex Prohibited**

The District has separate procedures for reports or complaints of sexual harassment governed by Title IX of the Education Amendments Act of 1972. The policy governing such instances is Code No. 504.5.2: Discrimination and Harassment Based on Sex Prohibited. Procedures for addressing such reports or complaints are available as follows:

Electronically on the District website at [www.cfschools.org/about-us/TitleIX](http://www.cfschools.org/about-us/TitleIX)

Paper copies are available in the administrative office and school counselor's office at each school as well as in the Human Resource Department in the Robinson Administration Center.

<b>Date of Adoption:</b>	June 23, 1975
<b>Date of Review:</b>	July 11, 2022
<b>Dates of Revision:</b>	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 September 28, 2020 March 19, 2024 July 14, 2025

## 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	
_____ 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
_____	Sexual Orientation	_____	Age
_____	Religion, Creed	_____	Disability
_____	National Origin, Ethnic Background		
_____	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