



## COMPLAINT FORM

Complaints may be filed with the District of Columbia State Athletic Association (DCSAA) against a member school athletic program. Individuals who have experienced, or witnessed, a violation of the DCSAA statute or regulations and wish to report the violation, must complete and submit this form along with supporting documentation. This form must be signed and dated by the individual making the complaint and should be emailed to the DCSAA General Counsel, Michael Aniton, at [michael.aniton@dc.gov](mailto:michael.aniton@dc.gov) or mailed to the District of Columbia State Athletic Association, 1050 First St, NE, 6<sup>th</sup> Floor, Washington, DC 20002. Additional sheets may be attached if necessary. Complaints are made available to the institution/alleged violator so that they may file a response to the allegations.

### COMPLAINANT INFORMATION

**Name of Person Submitting Complaint:**

**Address, City, State, Zip:**

**Day Phone #:**

**E-mail Address:**

### DETAILS OF COMPLAINT

**Name of the High School and Athletic Program Involved:**

**Alleged Violation (Specify date, location, names of school and staff involved, and the nature of the event. Attach documentation which will help describe the problem and substantiate allegations):**

Have you attempted to resolve the complaint with the athletic program involved? If not, why? If so, what was the outcome?

Have you filed this complaint with another organization?

YES

NO

If YES, provide:

Name of organization:

Outcome:

#### **CERTIFICATION**

*I hereby certify that I am the named complainant and affirm that the facts set forth in the complaint are true and accurate to the best of my knowledge. I understand that this complaint and the information provided will be shared with the athletic program involved.*

Signature of Complainant:

Date: