TO: Superintendents of Schools
FROM: Betty J. Sternberg
        Commissioner of Education
DATE: January 28, 2004
SUBJECT: Survey of Title IX Coordinators

As you are aware, Title IX is the Federal Law that was passed in 1972 to insure that male and female students and employees in educational settings were treated equally and fairly. It protects against discrimination based on gender. The preamble to Title IX of the Education Amendments of 1972 states that:

No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance.

Title IX requires that each school district have at least one person designated as the Title IX Coordinator, commonly referred to as the District Title IX Coordinator. Many school districts now have a Title IX Coordinator in each school building.

We last surveyed Title IX Coordinators in June of 2001. It is now time to update our database. Attached you will find the survey form. Please complete the information indicating your District Title IX Coordinator, as well as any other individuals that are designated. Please return the form no later than February 27, 2004.

If you have any questions, you may direct them to Dr. Bill Howe, Title IX Education Consultant, at 860-713-6737 or e-mail at: william.howe@po.state.ct.us.

BJS:wah
Attachment
Connecticut State Department of Education

TITLE IX COORDINATOR SURVEY

PLEASE PRINT OR TYPE

Name: _____________________________________________________

Job Title: _____________________________________________________

School/Institution: _____________________________________________________

District: ____________________________________ District Code: ______

Mailing Address: _____________________________________________________

(Street) (Town) (State) (Zip)

Telephone Number: _____________________Fax Number: ______________________

E-Mail Address: ______________________________________________

This person is the (check box):

☐ District Title IX Coordinator

☐ Building Title IX Coordinator (indicate school) _________________ School Code: ______

PLEASE MAIL OR FAX THIS FORM to:

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