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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Lipscomb University <u>1 University Park Dr.</u> Nashville, TN, 37204

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

While Victoria was a student at Lipscomb, the administration repeatedly refused to grant official status to the LGBT student group Victoria joined. Lipscomb officials failed to address complaints submitted by Victoria and others regarding harassment and discrimination perpetrated by students and school officials on campus. Because of Lipscomb's culture and rules, as well as the experiences of Victoria's peers, Victoria did not feel safe reporting a sexual assault against them to Lipscomb officials. Examples of the discrimination Victoria endured include: 1) A Lipscomb administrator told Victoria that any events they proposed would require a longer approval process than those submitted by others, because they would be considered "gay" events. 2) A Lipscomb football coach speaking at school chapel event Victoria attended compared gay men to "demon-possessed pedophiles." See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago, Victoria's complaint should not be considered time-barred because Lipscomb continues to discriminate against Victoria and to promulgate policies and practices that discriminate against LGBTQ+ students.</u>

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8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Victoria would also like Lipscomb's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Lipscomb in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Lipscomb will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or

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other code of conduct violations; and (5) Lipscomb's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Lipscomb, including housing and other programs

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

(Signature)

07/24/21 (Date)

Jul 26, 2021

(Date)

Victoria Bacon (Jul 26, 2021 14:12 CDT) (Signature of person in Item 2) Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

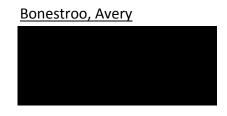
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	<u>Portland, OR 97203</u>
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Dordt University 700 7th St. NE Sioux Center, IA, 51250

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Dordt publishes anti-LGBTQ+ policies in its student handbook, including a prohibition on advocacy for LGBTQ+ rights. Dordt's policy states that students can be expelled for forbidden behavior. Professors and other students have told Avery to dress more femininely. Avery feels forced to use their birthname, hide their relationship with a woman, and use female pronouns because of the risk of discipline for doing otherwise. Avery fears filing a Title IX complaint through the school about the hostility they have experienced from other students because of the risk of discipline and potential expulsion. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

<u>3) The Trump administration's policies and statements about Title IX not prohibiting</u> discrimination on the basis of sexual orientation or gender identity.

4) Although the initial act of discrimination took place more than 180 days ago, Avery's complaint should not be considered time-barred because Dordt continues to discriminate against Avery and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Avery would also like Dordt's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Dordt in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Dordt will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Dordt's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Dordt, including housing and other programs Case 6:21-cv-00474-AA Document 48-1 Filed 08/06/21 Page 8 of 36

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12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021 (Date) Jul 26, 2021 (Date)

(Signature)

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	Swain, Lauren L.
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Fuller Theological Seminary - Bay Area
Address:	320 Middlefield Road
City, State, Zip Code:	<u>Menlo Park, CA 94025</u>
Department/School:	NA

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and marital status

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Nathan was expelled from Fuller Theological Seminary after the school discovered he was married to a man. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

<u>3) The Trump administration's policies and statements about Title IX not prohibiting</u> discrimination on the basis of sexual orientation or gender identity.

4) The discrimination against Nathan remains ongoing, as his same-sex marriage prevents him from being readmitted to complete his degree program. Although the initial act of discrimination took place more than 180 days ago, Nathan's complaint should not be considered time-barred because of the ongoing discrimination.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

<u>X</u>Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court for the Central District of CaliforniaDate Filed:11/21/19Case Number or Reference:2:19-cv-09969-CBM-MRWResults of Investigations/Findings by Agency or Court:Complaint dismissedbased on religious exemption to Title IX provisions, appeal filed and pending

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Nathan would also like Fuller Theological Seminary's policies amended to state that 2) samesex dating relationships and displays of affection will be treated by Fuller in the same manner as opposite-sex dating relationships and displays of affection; (3) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (4) Fuller will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (5) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (6) Fuller's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Fuller, including housing and other programs.

Compensation for emotional distress and economic consequences of expulsion.

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12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/07/2021 (Date) Jul 8, 2021 (Date)

(Signature) Nathan T. Brittsan

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:

<u>Brown, Hayden</u>	

3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>York College</u> <u>1125 E. 8th Street</u> <u>York, NE, 68467</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

The administration and Title IX staff discipline Hayden on an ongoing basis for dressing and behaving in a manner reflecting their gender identity. The administration does not allow an LGBTQ student alliance Hayden joined at York to meet on campus. The York administration has refused to adjust its code of conduct to treat all students equally, insisting on maintaining policies that target LGBTQ students for discipline for the same behaviors that sexual majority students are allowed to practice. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Hayden's complaint should not be considered time-barred because York continues to discriminate against Hayden and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed,

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures the decision in the matter.

See declaration attached.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Hayden would also like York's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by York in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) York will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) York's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of York, including housing and other programs.

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12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21
(Date)
Jul 24, 2021
(Date)

(Signature) (Jul 24, 2021 13:29 CDT) (Signature of person in Item 2)

EXHIBIT A - Title IX Complaints: BACON through DURON

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:

<u>C., Brooke</u>	

3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Cedarville University</u> <u>251 N. Main St.</u> <u>Cedarville, OH, 45314</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>Cedarville's undergraduate student handbook includes anti-LGBT policies.</u> <u>Cedarville has expelled students for coming out as gay. As a result, Brooke</u> <u>cannot use her real name or express her sexual orientation for fear of being</u> <u>dismissed or losing their degree. Brooke is aware of student statements that</u> <u>Cedarville uses its religious exemption to Title IX to dismiss sexual assault and</u> <u>harassment complaint. Please see attached declaration.</u>

6. What is the most **recent date** you were discriminated against?

Date: <u>Current, Ongoing</u>

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Brooke's complaint should not be considered time-barred because Cedarville continues to discriminate against Brooke and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

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Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Brooke would like Cedarville's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Cedarville in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Cedarville will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Cedarville's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Cedarville, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021 (Date) Jul 26, 2021 (Date)

5	51	*	
	2		
(Signature) Brooke C.			
Brooke C.			
Brooke C (Jul 26 2021 10:39 F	(TOC		

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Campbell, Gary



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Clarks Summit University</u> 538 Vernard Rd. <u>Clarks Summit, PA, 18411</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>Clarks Summit publishes anti-LGBT policies in its student handbook. Gary was</u> <u>reported to Clarks Summit officials for homosexual behavior by a dorm</u> <u>monitor who encouraged Gary to engage in sexual behavior with him. Gary</u> <u>was disciplined for homosexual behavior by Clarks Summit officials on other</u> <u>occasions, including being denied full-time attendance or the option of living</u> <u>off campus. Gary left Clarks Summit but attempted to re-enroll to complete</u> <u>the six credits he needed for graduation. Clarks Summit refused to re-enroll</u> <u>Gary or allow him to graduate. Please see attached declaration.</u>

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

<u>3) The Trump administration's policies and statements about Title IX not prohibiting</u> discrimination on the basis of sexual orientation or gender identity.

4) Although the initial act of discrimination took place more than 180 days ago, Gary's complaint should not be considered time-barred because Clarks Summit continues to discriminate against Gary and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures <u>See attached declaration.</u>

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Gary would like Clarks Summit's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Clarks Summit in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Clarks Summit will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Clarks Summit's nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of Clarks Summit, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	This
(Date)	(Signature)
Jul 26, 2021	Gary Camp ell (Jul 26, 2021 13:40 EDT)
(Date)	(Signature of person in Item 2)

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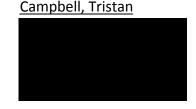
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Oklahoma Baptist University (OBU) 500 W. University St. Shawnee, OK, 74804

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

During his time at OBU, Tristan felt that he could not report a physical assault by a fellow student who was his romantic partner because of OBU's anti-LGBT culture and policies. The OBU administration fired Tristan from his Resident Assistant position because Tristan admitted to the Dean of Students that he is bisexual. The Dean also told Tristan that he was prohibited from coming out publicly on campus and that he could not guarantee Tristan's safety were Tristan to do so. After Tristan came out anyway, he learned that had been dismissed from OBU without receiving any notification. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

<u>X</u> I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.

4) The discrimination against Tristan remains ongoing, because his bisexual orientation prevents him from being readmitted to complete his degree program. Although the initial act of discrimination took place more than 180

days ago, Tristan's complaint should not be considered time-barred because OBU continues to discriminate against Tristan and to promulgate policies and practices that discriminate against LGBTQ+ students. Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Not applicable

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Tristan would also like OBU's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by OBU in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) OBU will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of Case 6:21-cv-00474-AA Document 48-1 Filed 08/06/21 Page 26 of 36

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conduct violations; and (5) OBU's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of OBU, including housing and other programs.

Compensation for emotional distress and economic consequences of expulsion.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	An	
(Date)	(Signature)	
Jul 24, 2021	Tristan Campbell (Jul 24 2021 15:43 CDT)	

(Date)

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Toccoa Falls College</u> <u>107 Kincaid Dr.</u> <u>Toccoa Falls, GA, 30598</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>Toccoa Falls publishes anti-LGBT policies in its student handbook. Because of</u> <u>this, Natalie cannot express her sexual orientation for fear of being</u> disciplined or expelled. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago, Natalie's complaint should not be considered time-barred because Toccoa Falls continues to discriminate against Natalie and to promulgate policies and practices that discriminate against LGBTQ+ students.</u>

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Natalie would also like Toccoa Falls' policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Toccoa Falls in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Toccoa Falls will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Toccoa Falls' nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of Toccoa Falls, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021
(Date)
Jul 23, 2021
(Date)

(Signature)	\sim
Natalie Carter (Jul 23, 2021 19:21 EDT)	
Natalle Carter (Jul 25, 2021 19:21 EDT)	

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:

<u>Craig, Saren</u>



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>College of the Ozarks (C of O)</u> <u>100 Opportunity Ave.</u> <u>Point Lookout, MO, 65726</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>C of O publishes policies that discriminate against LGBT people. A gay student killed himself in a C of O dean's garage after receiving messages of rejection from his campus community.</u> <u>C of O's current policy on sexual orientation and gender identity states:</u>

College of the Ozarks is guided by a long-standing traditional, biblical worldview which reflects the understanding that human sexuality is a gift from God, and that: sex assigned at birth is a person's God-given, objective gender, whether or not it differs from their internal sense of "gender identity" (Genesis 1:27; Leviticus 18:22; Matthew 19:4; Romans 1:26-27; 1 Corinthians 6:9-10); sexual relations are for the purpose of the procreation of human life and the uniting and strengthening of the marital bond in self-giving love, purposes that are to be achieved solely through heterosexual relationships in marriage (Genesis 1:28; 2:24; Exodus 20:14; Proverbs 5:15-23; Matthew 19:5; 1 Corinthians 6:12-20, 7:2-5; 1 Thessalonians 4:3).

Misuses of God's gift of human sexuality will be understood to include, but not be limited to gender expression inconsistent with sex assigned at birth (transgender), gender transition, sexual abuse, sexual harassment, sexual assault, heterosexual misconduct, homosexual conduct, or possession of pornographic materials. In addition, the College considers indiscreet public display of affection as inappropriate behavior...Toward this end, the College may subject to disciplinary action any employee or student who engages in or encourages:

1. Gender expression inconsistent with sex assigned at birth;

2 . Gender transition;

3. Sexual relations with a person other than his/her spouse;

4. Sexual relations with a person of the same sex;

<u>5</u>. Touching, caressing, and other physical conduct of a sexual nature with a person of the same sex;

6. Touching, caressing, and other physical conduct of a sexual nature

with a person of the opposite sex that is inappropriate to the time and place in which it occurs ._____

Disciplinary action may include disciplinary dismissal.

While Saren attended C of O, one of C of O's counselors came to their class and told students that if there was something in their past that they wanted to discuss, they could come and talk with her. Saren took the counselor up on her offer. In the course of the counseling, Saren informed the counselor that they were queer. Saren's campus counselor told Saren that their queerness was the result of their past abuse. This message from the counselor compounded the harm done by the abuse and caused Saren to become very depressed. Saren experienced this counseling as psychological abuse that increased their shame around sexuality. Saren eventually had to stop attending class at C of O because of their depression. Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

6. What is the most **recent date** you were discriminated against?

Date: <u>Current, Ongoing</u>

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago, Saren's complaint should not be considered time-barred because C of O continues to discriminate against Saren and to promulgate policies and practices that discriminate against LGBTQ+ students.</u>

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Saren would like C of O's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by C of O in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) C of O will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) C of O's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Ozarks, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

ö.

07/24/21	an
(Date)	(Signature)
Jul 24, 2021	Saren Craig
(Date)	(Signature adobecancelledaccountschannel.na3.documents.adobe.co m/verifier? tx=CBJCHBCAABAAJK2RzRdYCp2yv9TwZk4PgxO- AOMkLXJx
	tx=CBJCHBCAABAAJK2RzRdYCp2yv9TwZk4PgxO-

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren L.</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: <u>Alex Duron</u>



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Union University</u> <u>1050 Union University Dr.</u> Jackson, TN 38305

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>Alex applied to Union and was admitted for the Fall 2020 term. However, a</u> <u>few weeks before he was due to begin, Union revoked his admission upon</u> learning of his sexual orientation. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) The discrimination against Alex remains ongoing, as his sexual orientation prevents him from being admitted to Union University. Although the initial act of discrimination took place more than 180 days ago, Alex's complaint should not be considered time-barred because of the ongoing discrimination.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

<u>x</u>No

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Alex would like Union University's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Union in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Union will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Union's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Union, including housing and other programs.

<u>Compensation for emotional distress and economic consequences of revocation</u> <u>of acceptance.</u>

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/07/2021
(Date)
Jul 8, 2021
(Date)

(Signature) Alex Duron Nex Duron (Jul 8, 2021 13:37 PDT)

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren L.</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Indiana Wesleyan University
Address:	4201 Washington Street
City, State, Zip Code:	Marion, IN 46953
Department/School:	<u>_n/a</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of gender identity and sexual orientation

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Mortimer Halligan is a first-generation college student. They currently attend Indiana Wesleyan University (IWU). Mortimer applied to IWU knowing little about colleges. They chose IWU because Mortimer's church youth group staged an event on the IWU campus.

IWU has a comprehensive statement on human sexuality in its student handbook. The student handbook states:

- <u>God's plan for marriage and sexual fulfillment can only be found</u> within the context of marriage between one man and one woman.
- <u>Students must refrain from inappropriate relationships outside of a</u> <u>marriage between a man and a woman.</u>
- <u>Sexual relationships between persons of the same sex are immoral</u> and sinful.
- <u>Students are able to overcome the temptation to engage in same-sex</u> romantic relationships and practices.

The student handbook also encourages students who are struggling with issues of sexuality to write an email to an address that is "monitored by the executive director of the office of intercultural learning and engagement".

Mortimer is a member of a group of students who are attempting to start a gueer/straight alliance at IWU. The school does not recognize their student group, so they cannot recruit or receive funds for their group. Additionally, their group must meet off-campus for security reasons.

The group constantly faces harassment from other IWU students and alumni. The harassment includes (1) an alumnus directly harassing students through social media, (2) students destroying resources posted by the group about a suicide hotline, and (3) students and alumni at IWU subjecting LGBTQ+ students to slurs and harassment. IWU refuses to confront this harassment, despite repeated complaints by LGBTQ+ students.

IWU also disciplines LGBTQ+ students for expressing their sexual and/or gender identities (e.g. coming out as queer, dating someone of the same-sex, wearing certain clothing, etc.).

IWU's actions and failures to act make campus unsafe for IWU students who are part of the LGBTQ+ community.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

n/a

Please explain why you waited until now to file your complaint.

n/a

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

no

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

n/a

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

n/a

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Mortimer would like themself and their fellow students to feel safe on campus.

They would like IWU to recognize the Queer/Straight Alliance.

Mortimer would like IWU's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by IWU in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) IWU will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) IWU's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of IWU, including housing and athletics.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

<u>6/17/21</u> (Date)	Lauren L. Swain
Jun 20, 2021	M Timer Halligan (Jun 20, 2021 17:31 EDT)
(Date)	Mortimer Halligan

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

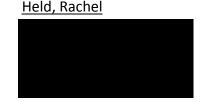
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Messiah University <u>1 University Ave.</u> Mechanicsburg, PA, 17055

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Rachel feared discipline and dismissal by the administration, and mistreatment by peers if they were to express their orientation as a bisexual woman because Messiah's policies state that students with same-sex attraction are expected to refrain from expressing it and because Messiah's policies encourage students to report on other student's behavior. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions</u> to Title IX;
 <u>3) The Trump administration's policies and statements about Title IX not</u> prohibiting discrimination on the basis of sexual orientation or gender identity.
 <u>4) Although the initial act of discrimination took place more than 180 days ago,</u> <u>Rachel's complaint should not be considered time-barred because Messiah</u> <u>continues to discriminate against Rachel and to promulgate policies and practices</u> that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

<u>No</u>

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Rachel would like Messiah's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Messiah in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Messiah will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Messiah's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Messiah, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21
(Date)
Jul 24, 2021
(Date)

Cont 1	
CL	
(Signature)	
mull	
Rachel Held (Jul 24, 2021 15:15 EDT)	
(Signature of person in Ite	m 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

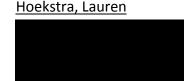
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Dordt University 700 7th St. NE Sioux Center, IA, 51250

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Dordt publishes anti-LGBT policies in its student handbook, including a prohibition on advocacy for LGBT rights. Dordt's policy states that students can be expelled for forbidden behavior. Because Lauren chose to come out as a lesbian, she fears discrimination on the part of some of her professors and does not felt safe and accepted at Dordt because of its policies. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Lauren's complaint should not be considered time-barred because Dordt continues to discriminate against Lauren and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures <u>See attached declaration.</u>

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Lauren would like Dordt's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Dordt in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Dordt will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Dordt's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Dordt, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021	
(Date)	
Jul 26, 2021	
(Date)	

G. Hoekstra (Jul 26, 2021 11:17 CDT

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Horning, Chandler



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Brigham Young University - Idaho (BYU-I) 525 Center St. Rexburg, ID, 83460

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

BYU-I withdrew its policy banning same-sex romantic behavior in February 2020, but reinstated it a few weeks later, when a commissioner from the LDS church sent out a letter stating that same-sex romantic behavior is "not compatible with the principles included in the honor code." Chandler could not express his sexual orientation and lived in fear of being expelled and removed from his university housing based on BYU-I's anti-LGBT policies. A faculty member held a "therapy" group for LGBT students trying to come to peace with marrying someone of the opposite sex. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity. 4) Although the initial act of discrimination took place more than 180 days ago, Chandler's complaint should not be considered time-barred because BYU-I continues to discriminate against Chandler and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Chandler would like BYU-I's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by BYU-I in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) BYU-I will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) BYU-I 's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Brigham Young, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.



Case 6:21-cv-00474-AA Document 48-2 Filed 08/06/21 Page 14 of 34

Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Bob Jones University (BJU) 1700 Wade Hampton Blvd. Greenville, SC, 29614

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of (sexual orientation, gender identity and/or marital status)

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

BJU publishes anti-LGBT policies in its student handbook, including a prohibition on students advocating for LGBT rights on social media. School staff disciplined Elizabeth for posting pro-LGBT material on social media and tried to force her to admit her sexual orientation during a long meeting. They asked her to disavow her support for LGBT rights and relationships, then put her on probation for refusing to do so. As a result, Elizabeth felt she could not express her views about LGBT rights and that she must hide her sexual orientation for the remainder of her time at BJU. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Elizabeth's complaint should not be considered time-barred because Bob Jones continues to tdiscriminate against Elizabeth and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

Case 6:21-cv-00474-AA Document 48-2 Filed 08/06/21 Page 16 of 34

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Elizabeth would also like Bob Jones's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Bob Jones in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Bob Jones will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Bob Jones's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Bob Jones, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	
(Date)	
Jul 24, 2021	
(Date)	

(Signature) 24, 2021 14:49 EDT)

(Signature of person in Item 2)

Case 6:21-cv-00474-AA Document 48-2 Filed 08/06/21 Page 17 of 34

Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

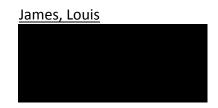
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Indiana Wesleyan University
Address:	4201 S. Washington St.
City, State, Zip Code:	<u>Marion, IN 46953</u>
Department/School:	

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Indiana Wesleyan University's Student Handbook includes anti-LGBT policies. Louis feels the need to hide his sexual orientation at Indiana Wesleyan because these policies make him fear getting expelled for being gay. Louis learned that Indiana Wesleyan fired a Resident Assistant for being gay and this increased his anxiety. Indiana Wesleyan officials did not remove anti-LGBT messages painted by other students at the school. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

<u>X</u> I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Louis' complaint should not be considered time-barred because Indiana Wesleyan continues to discriminate against Louis and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Louis would like Indiana Wesleyan's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Indiana Wesleyan in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Indiana Wesleyan will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Indiana Wesleyan's nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of Indiana Wesleyan, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

C

07/29/2021	and the second s
(Date)	(Signature)
Jul 29, 2021	Louis James (Jul 29, 2021 21:37 EDT)
(Date)	(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: <u>Jones, Jonathan</u>



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Azusa Pacific University 901 E. Alosta Ave. Azusa, CA, 91702

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity.

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Azusa Pacific reinstated its ban on same-sex dating while Jonathan was a student. Jonathan and other students were fearful of punishment for having revealed their sexual orientation because the ban had been lifted. Jonathan worried that his scholarship would be revoked. Azusa Pacific later altered its policy again to leave the question of punishment for sexual orientation ambiguous. Azusa Pacific has imposed limitations on the LGBT student group that it has not imposed on other student groups. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Jonathan's complaint should not be considered time-barred because Azusa Pacific continues to discriminate against Jonathan and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Jonathan would like Azusa Pacific's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Azusa Pacific in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Azusa Pacific will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Azusa Pacific's nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of Azusa Pacific, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21 (Date) Jul 24, 2021 (Date)

Signature

Jona Jan Jones (J(124, 2021 16:04 PDT) (Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: <u>Swain, Lauren</u> 8532 N. Ivanhoe St., #208 Portland, OR 97203

lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address:

City, State, Zip Code: Department/School: <u>Regent School of Law</u> <u>1000 Regent University Drive,</u> <u>RH 255L</u> <u>Virginia Beach, VA, 23464</u> <u>School of Law</u>

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- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Although Regent representative told Jamie before she enrolled that being a lesbian was not a problem for the school, after she became a student, Regent officials warned Jamie that she could be expelled for "premarital sex" because she is in a lesbian relationship or if she were to bring her girlfriend on campus. A professor harassed Jamie because of her sexual orientation and repeatedly condemned and insulted LGBT people in class. Regent did not respond to Jamie's complaints about the professor's behavior.

Regent's student handbook contains the following: "Sexual misconduct that is prohibited includes disorderly conduct or lewd, indecent, or obscene conduct or expression, involvement with pornography, premarital sex, adultery, homosexual conduct or any other conduct that violates Biblical standards."

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about</u> religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.

<u>4) Although the initial act of discrimination took place more than 180</u> <u>days ago, Jamie's complaint should not be considered time-barred</u> <u>because Regent continues to discriminate against Jamie and to</u> <u>promulgate policies and practices that discriminate against LGBTQ+</u> <u>students.</u>

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Jamie attended many classes at Regent where professors described LGBTQ+ people as pedophiles, child molesters, undeserving of marriage, and as destined for hell. Jamie reported these incidents to Regent administration but the administration took no action.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

 Agency or Court:
 U.S. District Court - District of Oregon

 Eugene Division

 Date Filed:
 03/29/21

 Case Number or Reference:
 6:21-cv-00474-AA

 Results of Investigations/Findings by Agency or Court:
 Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Jamie would like Regent's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Regent in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Regent will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Regent's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Regent, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

-

10 miles
(Signature)
Jamie Lord (Jul 24, 2021 13:30 EDT)
(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Markowski, Ashtin



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Brigham Young University A-209 ASB Provo, UT, 84602

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

In February 2020 BYU removed its ban on "homosexual behavior." A few weeks later it reinstated the ban. Ashtin was fired from her job for cutting her hair in a style that was deemed too "extreme and distracting", and masculine, even though a man whose bleached hair violated the rules was hired at the same time. Ashtin constantly worried she would get thrown out of school for dating someone of the same gender. Ashtin was counseled by a BYU-appointed Bishop to dress more femininely and to overcome "temptation" and "same-sex attraction." Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Ashtin's complaint should not be considered time-barred because BYU continues to discriminate against Ashtin and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Utah - Central DivisionDate Filed:12/11/20Case Number or Reference:2:20-cv-000872-JNP-CMRResults of Investigations/Findings by Agency or Court:Pending

Agency or Court: U.S. District Court - District of Oregon - Eugene Division Date Filed: 03/29/21 Case Number or Reference: 6:21-cv-00474-AA Results of Investigations/Findings by Agency or Court: Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Ashtin would also like Brigham Young's policies amended to state that (1) samesex dating relationships and displays of affection will be treated by Brigham Young in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Brigham Young will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Brigham Young's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Brigham Young, including housing and other programs.

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Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/26/21	Softin
(Date)	(Signature)
Jul 26, 2021	Asht Markowski
(Date)	(Signature of person in Item 2)

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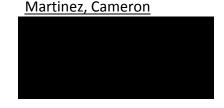
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: La Sierra University 4500 Riverwalk Pkwy. Riverside, CA, 92505

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

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Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

The La Sierra administration has repeatedly refused official status to an LGBT student group formed by Cameron and others. Cameron fears expulsion for same-sex dating, in part because La Sierra officially endorses doctrine stating that "sexual acts outside of heterosexual marriage are forbidden." La Sierra officials have repeatedly refused to address complaints of discrimination on campus submitted by Cameron and others. See attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity. 4) Although the initial act of discrimination took place more than 180 days ago, Cameron's complaint should not be considered time-barred because La Sierra continues to discriminate against Cameron and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

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Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from</u> <u>administrative positions involved in enforcing student codes of conduct/honor</u> <u>code and prevent the sharing of information from Title IX office to administrative</u> <u>offices involved in enforcing student codes of conduct/honor code.</u>

Cameron would also like La Sierra's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by La Sierra in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) La Sierra will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) La Sierra's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of La Sierra, including housing and other programs.

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Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21
(Date)
Jul 24, 2021
(Date)

(Signature) ameron Martinez

Cameron Martinez (Jul 24, 2021 19:50 MDT)

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:

<u>Maxon, Joanna</u>	

3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Fuller Theological Seminary
Address:	135 N. Oakland Ave.
City, State, Zip Code:	Pasadena, CA 91182
Department/School:	

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and marital status

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Joanna was expelled from Fuller Theological Seminary after the school discovered she was married to a woman. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

<u>X</u> I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.

<u>4) The discrimination against Joanna remains ongoing, as her same-sex</u> marriage prevents her from <u>being readmitted to complete her degree</u>

program. Although the initial act of discrimination took place more than 180 days ago, Joanna's complaint should not be considered time-barred because of the ongoing discrimination.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

<u>X</u>Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court for the Central District of CaliforniaDate Filed:11/21/19Case Number or Reference:2:19-cv-09969-CBM-MRWResults of Investigations/Findings by Agency or Court:Complaint dismissedbased on religious exemption to Title IX provisions, appeal filed and pending

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Joanna would also like Fuller Theological Seminary's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Fuller in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Fuller will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Fuller's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Fuller, including housing and other programs.

Compensation for emotional distress and economic consequences of expulsion.

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12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/07/2021
(Date)
Jul 8, 2021
(Date)

(Signature)

Joanna A Maxon Joanna A Maxon (Jul 8, 2021 12:17 CDT)

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: McCann, Mackenzie



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Liberty University</u> <u>1971 University Blvd.</u> Lynchburg, VA, 24515

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Liberty publishes anti-LGBT policies in its Statement on Sexuality and Relationships and Student Honor Code. Because of these policies, Mackenzie could not express their sexual orientation or gender identity out of fear of being disciplined or expelled. Mackenzie felt forced to leave the school in 2018 without graduating, in order protect their mental health. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity. 4) Although the initial act of discrimination took place more than 180 days ago, Mackenzie's complaint should not be considered time-barred because Liberty continues to discriminate against Mackenzie and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Mackenzie would like Liberty's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Liberty in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Liberty will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Liberty's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Liberty, including housing and other programs.

<u>Compensation for emotional distress and for the economic consequences of</u> needing to leave Liberty without graduating.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021 (Date) Jul 25, 2021 (Date)

nzie J McCann (Jul 25, 2021 19:45 EDT)

(Signature of person in Item 2)

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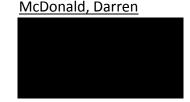
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Fuller Theological Seminary</u> <u>135 N. Oakland Ave.</u> <u>Pasadena, CA, 91182</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>Fuller publishes anti-LGBT policies in its student handbook and does not</u> provide students with clear guidelines regarding what behavior or speech is prohibited by the school. A class Darren attended included anti-LGBT programming. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Darren's complaint should not be considered time-barred because Fuller continues to discriminate against Darren and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Darren would like Fuller's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Fuller in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Fuller will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Fuller's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Fuller, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21 (Date) Jul 24, 2021 (Date)

Signature)

(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Westmont College</u> <u>955 La Paz Rd.</u> <u>Santa Barbara, CA, 93108</u>

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Westmont publishes anti-LGBT policies in its student handbook. Darren was laughed at and humiliated by other students when he played a gay character in a theater production at Westmont. He did not feel comfortable reporting the incident or other problems related to anti-LGBT discrimination because of Westmont's policies. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions</u> to Title IX;
 <u>3) The Trump administration's policies and statements about Title IX not</u> prohibiting discrimination on the basis of sexual orientation or gender identity.
 <u>4) Although the initial act of discrimination took place more than 180 days ago,</u> <u>Darren's complaint should not be considered time-barred because Westmont</u> <u>continues to discriminate against Darren and to promulgate policies and practices</u> that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Darren would like Westmont's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Westmont in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Westmont will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Westmont's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Fuller, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21 (Date) Jul 24, 2021 (Date)

(Signature) rren

<u>Darren McDonald (Jul 24, 2021 17:00 PDT)</u> (Signature of person in Item 2)

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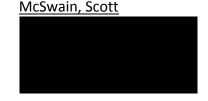
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Union University</u> <u>1050 Union University Dr.</u> Jackson, TN, 38305

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Union officials told Scott they had been informed that he was gay and that he would be expelled and have all his credits taken away if he did not attend conversion therapy. Union gave Scott vouchers for a specific conversion therapy program. Scott was sexually assaulted by his therapist during one of the conversion therapy sessions and he reported it to Union officials. Union's current student handbook includes anti-LGBT policies including a statement that "The promotion, advocacy, defense, or ongoing practice of a homosexual lifestyle (including same-sex dating behaviors) is also contrary to our community values." Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: <u>Current, Ongoing</u>

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

<u>3) The Trump administration's policies and statements about Title IX not prohibiting</u> discrimination on the basis of sexual orientation or gender identity.

4) Although the initial act of discrimination took place more than 180 days ago, Scott's complaint should not be considered time-barred because Union continues to discriminate against Scott and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Scott would like Union's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Union in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Union will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Union's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Union, including housing and other programs.

Compensation for mental and physical health conditions related to sexual assault and other injuries sustained during conversion therapy sessions required by Union.

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Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	Soli-
(Date)	(Signature)
Jul 26, 2021	E
(Date)	Scott McSwain (Jul 26, 2021 11:18 PDT) (Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: <u>Millender, Faith.</u>



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Eastern University	
Address:	<u>1300 Eagle Rd.</u>	
City, State, Zip Code:	<u>St. Davids, PA, 19087</u>	
Department/School:	<u>School of Nursing</u>	

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Because of Eastern's official statements vaguely implying that LGBT students are not welcome or recognized, Faith is not comfortable revealing her sexual orientation to some professors and staff. Professors at Eastern are bound by a clause prohibiting "homosexual conduct." Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

<u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago, Faith's complaint should not be considered time-barred because Eastern continues to discriminate against Faith and to promulgate policies and practices that discriminate against LGBTQ+ students.</u>

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Faith would like Eastern's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Eastern in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Eastern will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Eastern's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Eastern, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21
(Date)
Jul 24, 2021
(Date)

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>	0		2		_
Signat	ure				-

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	Brigham Young University (BYU-I)
Address: City, State, Zip Code: Department/School:	525 Center St. Rexburg, ID, 83460

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures Discrimination on the basis of sexual orientation

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

BYU-I maintains anti-LGBT policies. Current policy is ambiguous about whether or not same-sex dating will be disciplined. Professors taught anti-LGBT content in many of classes Rachel attended. The LBGT group at BYU-I was not allowed to meet on campus. BYU-I taught that same sex attraction could be "cured." When Rachel realized she could not be "cured", she attempted suicide in her first semester at BYU-I. Rachel felt unwelcome at BYU-I and left the school in 2017. Rachel left again without graduating after returning for an online semester in late 2020 because the discriminatory teachings in the classes Rachel attended were too harmful to her mental health. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious</u> <u>exemptions to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not</u> prohibiting discrimination on the basis of sexual orientation or gender identity.
 <u>4) The discrimination against Rachel remains ongoing, as BYU's policies and</u> teaching prevent Rachel from feeling safe enough at BYU to complete her degree program at BYU. Although the initial act of discrimination took place more than 180 days ago, Rachel's complaint should not be considered time-barred because BYU continues to discriminate against Rachel and to promulgate policies and practices that discriminate against LGBTQ+ students.</u> Case 6:21-cv-00474-AA Document 48-3 Filed 08/06/21 Page 23 of 33

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

> Agency or Court: U.S. District Court - District of Oregon - Eugene Division Date Filed: 03/29/21 Case Number or Reference: 6:21-cv-00474-AA Results of Investigations/Findings by Agency or Court: Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

<u>Not applicable</u>

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Rachel would like BYU's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by BYU in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) BYU will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) BYU's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of BYU, including housing and other programs.

<u>Compensation for emotional distress and for the economic consequences of not</u> <u>being able to complete her degree.</u> Case 6:21-cv-00474-AA Document 48-3 Filed 08/06/21 Page 24 of 33

Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021 (Date) Jul 23, 2021 (Date)

(Signature)

RachMath Rachel Moulton (Jul 23, 2021 13:50 PDT)

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

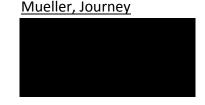
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution:	<u>Cc</u>
Address:	<u>87</u>
City, State, Zip Code:	La
Department/School:	

Colorado Christian University (CCU) 8787 W. Alameda Ave. Lakewood, CO 80226

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

<u>CCU publishes anti-LGBTQ+ policies in its student handbook and encourages</u> <u>students to report violations of its policies by other students. Journey's</u> <u>roommates locked her in her dorm room and forced her to confess her</u> <u>sexual orientation, then reported her to school officials. In response, CCU</u> <u>officials placed Journey on academic probation, removed her from her</u> <u>housing, and required her to attend conversion therapy and mentorship</u> <u>meetings. CCU blocked access to LBGTQ+ -affirming resources on their wi-fi</u> <u>service. As a result of this mistreatment, Journey's mental health suffered to</u> <u>the point where she felt compelled to leave CCU before completing her</u> <u>degree. Please see attached declaration.</u>

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Journey's complaint should not be considered time-barred because CCU continues to discriminate against Journey and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Journey would like CCU's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by CCU in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) CCU will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) CCU's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of CCU, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/29/2021	an
(Date)	(Signature)
Aug 2, 2021	AN~
(Date)	(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Penales, Veronica Bonifacio



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Baylor University 1311 S. 5th St. Waco, TX, 76706

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Baylor publishes a statement on sexuality that includes anti-LGBT policies. The statement urges students "struggling" with same sex attraction to seek counseling. Baylor claims in its Civil Rights policy that it is exempt from compliance with select civil rights laws on the basis of religious exemption. As a result of these policies, Veronica does not feel free to express her sexual orientation while attending Baylor. When Veronica reports harassment hateful anti-LGBT statements from other students, officials at the school do not address it and instead tell her to seek counseling. As a result, Veronica has stopped reporting hate speech to the school staff. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity. 4) Although the initial act of discrimination took place more than 180 days ago, Veronica's complaint should not be considered time-barred because Baylor continues to discriminate against Veronica and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

Yes

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Veronica would like Baylor's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Baylor in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Baylor will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Baylor's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Baylor, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021
(Date)
Jul 24, 2021
(Date)

Softing .
(Signature-) https://secure.na3.adobesign.com/verifier?
Veronica Bonifacio Penales (Jul 24, 2021 17:29 CDT)
(Signature of person in Item 2)

Case 6:21-cv-00474-AA Document 48-3 Filed 08/06/21 Page 31 of 33

Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

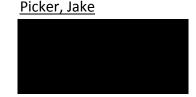
DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Baylor University 1311 S. 5th St. Waco, TX, 76706

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation.

Case 6:21-cv-00474-AA Document 48-3 Filed 08/06/21 Page 32 of 33

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Baylor publishes a statement on sexuality that includes anti-LGBT policies. Jake fears that his sexual orientation will affect the way he is treated as a student of Baylor and may subject him to discipline that could affect his career in medicine. An LGBTQ student group at Baylor has been repeatedly denied official status. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions</u> <u>to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not</u> <u>prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago,</u> <u>Jake's complaint should not be considered time-barred because Baylor continues</u> <u>to discriminate against Jake and to promulgate policies and practices that</u> <u>discriminate against LGBTQ+ students.</u>

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

Case 6:21-cv-00474-AA Document 48-3 Filed 08/06/21 Page 33 of 33

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Jake would like Baylor's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Baylor in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Baylor will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Baylor's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Baylor, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/23/2021	The
(Date)	(Signature)
Jul 23, 2021	Jake Picke (1416-2021 16:25 CDT)
(Date)	(Signature of person in Item 2)

Case 6:21-cv-00474-AA Document 48-4 Filed 08/06/21 Page 1 of 23

Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Steffen, Megan



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Moody Bible Institute 820 N. LaSalle Dr. Chicago, IL, 60610

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Moody Bible Institute publishes anti-LGBT policies in its student handbook. Moody staff disciplined Megan for attending the Women's march and for statements making statement in support of LGBT rights on social media by requiring her to meet with administrators regularly to discuss her behavior. Moody staff strongly encourage Megan to meet with religious leaders to "work through" her sexual identify. Moody staff told Megan that her graduation may be denied if she did not agree to certain statements about sexual orientation. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Megan's complaint should not be considered time-barred because Moody continues to discriminate against Megan and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Megan would like Moody's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Moody in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Moody will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Moody's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Moody, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/26/21	The
(Date)	(Signature)
Jul 26, 2021	Megan Steffen (Jul 26, 2021 14:46 EDT)
(Date)	(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Tidwell-Davis, Daniel Christopher



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Lee University 1120 N. Ocoee St. Cleveland, TN, 37311

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Daniel has stated the following:

"While I was a student at Lee, LGBTQ students were isolated from one another, denied protection against discrimination and harassment, denied permission to form affirming groups, and some students who participated in an underground LGBTQ support group were expelled. I knew a student who was expelled for having a DVD of the feature film Latter Days, a gay themed movie, in his room. I knew of another student who was expelled because he was reported to the school for having been seen on a date with another man over the summer when he was at home in another state.

As a student employee, working as a Resident Assistant in dormitories, I was required to search residents' rooms for LGBTQ materials like films, music, and books, and to watch for any indications of students in same-sex relationships. I was required to report them, with the understanding that this would be grounds for their expulsion.

Lee University had no anti-harassment protections for LGBTQ students at the time I attended. When I enrolled in 2002 at the age of 17, I was required to sign a community covenant that prohibited same-sex sexual activity and that did not include protections against harassment and discrimination on the basis of sexual orientation, gender identity or gender expression. (Lee's "Community Covenant" can be found here: hbp://catalog.leeuniversity.edu/ content.php?catoid=14&navoid=13830)

When I worked for Residential Life as a Resident Assistant (2003-2005) residents harassed me with heterosexual pornography, exposed themselves to me, and verbally harassed me as a result of their perception of my sexual orientation. In weekly staff meetings, the supervising Resident Director (now deceased) regularly made sexist and homophobic comments and jokes including using homophobic slurs (as well as racist jokes about a fellow Resident Assistant). One time, while I was a Resident Assistant of a floor in a freshman men's dorm a group of students began throwing pool balls at my bedroom door at 2am. When I opened the door to confront them, the ringleader of the group was completely naked doing a handstand in my doorway with his genitals inches from my face, while 8-10 young men stood behind him howling with laughter. But I did not feel comfortable reporting this incident, due to the way the school has treated other gay students. Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

When I disclosed my experiences of childhood sexual abuse and my understanding of my sexual orientation to the Director of Student Development, he pressured me into participating in an unofficial conversion therapy group he led that was made up of a few of my peers who were also trying to change their orientation. The Director told our group that our sexual orientation was a result of our childhood sexual abuse. He gave us books to read about the Bible and homosexuality. He repeatedly expressed his disgust with gay sexuality to us. Group members were required to talk about our sexual fantasies, masturbation, pornography use, and sexual activity. Along with "confessing" same-sex desires and sexual activity, we were coached in being more typically masculine and encouraged to think of women sexually. By participating in the group we were ostensibly being protected from suspension or/and expulsion by the Dean of Students. We were led to believe that the Director of Student Development was "looking out for us" by putting us through this therapy group.

In 2006, when the SoulForce Equality Ride visited the Lee campus to advocate for fair treatment of LGBTQ students, school administrators banned the group from entering any buildings and from meeting formally with students. In advance of their visit, the university held mandatory chapel services to reinforce the school's anti-LGBTQ policies and beliefs. They presented residential life staff with multiple conversion therapy ("ex-gay") resources, a slide presentation presenting debunked theories about gay and lesbian identity development, and pamphlets for local and national conversion therapy programs to distribute to students. This presentation was given in one of my classes, where we were alsowarned away from speaking with the Equality Riders when they were on campus.

The same Director of Student Development who led the ex-gay therapy group hired me to step in at the last minute as a Resident Assistant for a High School Summer Honors Camp. I was told that another Resident Assistant might be gay and that he should not be allowed on the same floor with the high school summer honors students without someone else there to watch him and make sure that he didn't do anything sexual with any of the students. The implication was that someone who was gay and not participating in conversion therapy was potentially a sexual predator.

While under the guidance of the Director of Student Development, I was encouraged to date a female student at Lee University. Later, we were encouraged to marry each other, and the Director conducted pre-marital counseling with us while we were still enrolled as students, just prior to our graduation in 2007. This led to my first marriage, which ended in divorce four years later after I accepted my sexual orientation. Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

In addition to these incidents which occurred primarily in student life and housing, there was a broader hostile environment promoted across campus due to the requirement to attend chapel services that annually featured homophobic sermons condemning LGBTQ ideas and promoted conversion therapy and sexual orientation change.

In an institutional survey provided to faculty while I was a student, the outside surveyors noted that students at the time were hesitant to visit the on-campus health clinic for STI screenings and sexual health education due to the school's religious stances toward human sexuality. At the time I was a student, and even as I worked in residential life, I was not made aware of the Title IX office. I knew of multiple straight and LGBTQ students who experienced sexual assault and did not report to the university due to fear of being expelled for extra-marital sexual conduct. One gay friend who was sexually assaulted off-campus by another man later sought counseling and was sent to an ex-gay program, and school officials reported this information to the denomination that controls the school, resulting in the gay student losing his ministerial credentials with the denomination.

There was not a school approved LGBTQ affirming group at the time I was a student, and I believe there is no official one now. There have been underground LGBTQ groups and, in the past, school administrators have targeted students for expulsion who participated in or promoted these secret groups on social media."

Lee University's 2020-2021 Student Handbook includes a policy on page 8 stating that "Engaging in any sexual acts expressly condemned in scripture (premarital sex, adultery, and same-sex sexual behavior, etc.) will result in disciplinary consequences that may include suspension or expulsion" as well as other anti-LGBT language.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

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Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;
3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Daniel's complaint should not be considered time-barred because Lee continues to discriminate against Daniel and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Daniel would also like Lee's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Lee in the same manner

Page 6 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Lee will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Lee's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Lee, including housing and other programs, (6) The sanctioning of an LGBTQ student group. (7) Positive and comprehensive LGBTQ healthcare and mental healthcare through the university clinic and counseling center. (8) Campus-wide programming to address the hostile environment, peer harassment, and discrimination faced by LGBTQ students. (9) Full reimbursement of tuition, fees, and related expenses for all former students expelled by Lee for being LGBTQ or for same-sex sexual behavior.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	Ani
(Date)	(Signature) Denil C. Hund Durin
Jul 24, 2021	Daniel C. Tidwell-Davis (Jul 24, 2021 15:49 PDT)
(Date)	(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Tidwell-Davis, Justin Michael



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Baylor University 1311 S. 5th St. Waco, TX, 76706

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Baylor's policies on homosexuality played a significant role in Justin's motivation to enroll in conversion therapy, which was psychologically damaging to him and interfered with his education. Baylor's sexual misconduct policy listed "homosexual acts" as a disciplinary offense alongside sexual abuse, incest and adultery. Baylor's policies did not describe what sort of acts would be punished, causing Justin to fear discipline for expressing his sexual orientation in any form. Justin witnessed a Baylor professor erasing a message of support for LGBTQIA+ students, a simple "God loves you" with a rainbow, from the sidewalk by scrubbing it off with his foot. While Justin was at Baylor, a gay graduate student was outed and had his scholarship revoked. Justin has spoken with other Baylor alumni who report being subjected to exorcisms by other students, shunned, and told they were mentally ill or demonically possessed for being LGBTQIA+. Some of Justin's friends at Baylor didn't report sexual harassment and assault because they feared that they would be punished for having been assaulted by someone of the same sex.

The existing LGBTQ student group, Gamma Alpha Upsilon (GAY), formerly the Sexual Identity Forum, has existed since the Spring of 2011, and sought to have Baylor charter the organization every year since, without success. In nearly all communications regarding denying GAY's application for an official charter, Baylor's spokespeople and administration have stated that Baylor is committed to the "biblical" understanding of marriage and sexuality, as stated in the Southern Baptist Convention's Baptist Faith and Message of 1963, which shapes Baylor's sexual misconduct policy and statement on human sexuality. However, Baylor's Board of Regents issued a resolution on May 14, 2021 charging Baylor's President, Linda Livingstone, and Baylor's administration with considering the possibility of establishing a new university charted LGBTQ group that aligns with Baylor's sexual misconduct policy and statement on human sexuality.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

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Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

discriminate against LGBTQ+ students.

2) The Trump administration's policies and statements about religious exemptions to Title IX;
3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Justin's complaint should not be considered time-barred because Baylor continues to discriminate against Justin and to promulgate policies and practices that

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Justin could find no avenue to resolve these issues while he was a student

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

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11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Justin would also like Baylor's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Baylor in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Baylor will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Baylor's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Baylor, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21 (Date) Jul 26, 2021 (Date)

(Signature) JUSEIN TIOWell-DAVIS Justin Tidwell-Davis (Jul 26, 2021 10:21 PDT)

(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Vigil, Spencer



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: Seattle Pacific University 3307 3rd Ave W. Seattle, WA, 98119

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Seattle Pacific University publishes anti-LGBT policies in its Statement on Human Sexuality and Standards of Conduct. Spencer feared revealing his gender identity or having it be discovered. Students and a teacher called Spencer anti-LGBT slurs on campus. A professor gave Spencer a document explaining that he could be subject to loss of his scholarship and other sanctions for knowingly breaking "lifestyle expectations" related to his gender identity. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago**, you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions</u> to Title IX;
 <u>3) The Trump administration's policies and statements about Title IX not</u> prohibiting discrimination on the basis of sexual orientation or gender identity.
 <u>4) Although the initial act of discrimination took place more than 180 days ago,</u> <u>Spencer's complaint should not be considered time-barred because Seattle Pacific</u> continues to discriminate against Spencer and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

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9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Spencer would like Seattle Pacific's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Seattle Pacific in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Seattle Pacific will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Seattle Pacific's nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of Seattle Pacific, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	Som
(Date)	(Signature).
Jul 26, 2021	Spencer J. V/d (Jul 26, 2021 13:33 PDT)
(Date)	(Signature of person in Item 2)

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DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address:

<u>Wilson, Lucas</u>



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: <u>Liberty University</u> <u>1971 University Blvd.</u> Lynchburg, VA, 24515

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation

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5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

Liberty's Statement on Sexuality and Relationships provides vague guidelines indicating that behavior reflecting LGBT identify is a violation of the Student Honor Code. Lucas feared Liberty would punish him for being gay, and enrolled in a conversion therapy program provided and encouraged by Liberty policy as a way to avoid punishment for policy violations related to LGBT identity. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

 $\underline{\mathbf{X}}$ I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

1) the Covid-19 pandemic;

2) The Trump administration's policies and statements about religious exemptions to Title IX;

3) The Trump administration's policies and statements about Title IX not prohibiting discrimination on the basis of sexual orientation or gender identity.
4) Although the initial act of discrimination took place more than 180 days ago, Lucas's complaint should not be considered time-barred because Liberty continues to discriminate against Lucas and to promulgate policies and practices that discriminate against LGBTQ+ students.

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

No

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

Not applicable

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Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

Lucas would like Liberty's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by Liberty in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) Liberty will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual activity or other code of conduct violations; and (5) Liberty's non-discrimination policy includes sexual orientation and gender identity as applied to all aspects of Liberty, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

07/24/21	
(Date)	(Signature) Lucas Wilson
Jul 27, 2021	LUCAS WILSON Lucas Wilson (Jul 27, 2021 09:42 EDT)
(Date)	(Signature of person in Item 2)

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Page 1 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

DISCRIMINATION COMPLAINT FORM to the United States Department of Education Office for Civil Rights

1. Name of person filing this complaint:

Last Name, First, Middle	<u>Swain, Lauren</u>
Address:	<u>8532 N. Ivanhoe St., #208</u>
City, State, Zip Code:	Portland, OR 97203
Home/Work Telephone:	
Email Address:	lauren@paulsouthwick.com

2. Name of person discriminated against (if **other** than person filing). If the person discriminated against is age 18 or older, we will need that person's signature on this complaint form and the consent/release form before we can proceed with this complaint. If the person is a minor, and you do not have the legal authority to file a complaint on the student's behalf, the signature of the child's parent or legal guardian is required.

Last Name, First, Middle Address: City, State, Zip Code: Home/Work Telephone: Email Address: Wojnarowisch, Audrey



3. OCR investigates discrimination complaints against institutions and agencies which receive funds from the U.S. Department of Education and against public educational entities and libraries that are subject to the provisions of Title II of the Americans with Disabilities Act. Please identify the institution or agency that engaged in the alleged discrimination. If we cannot accept your complaint, we will attempt to refer it to the appropriate agency and will notify you of that fact.

Name of Institution: Address: City, State, Zip Code: Department/School: George Fox University 414 N. Meridian St. Newberg, OR, 97132

- 4. The regulations OCR enforces prohibit discrimination on the basis of race, color, national origin, sex, disability, age or retaliation. Please indicate the basis of your complaint:
- Discrimination **based on sex (specify)**

Discrimination on the basis of sexual orientation and gender identity

Page 2 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

5. Please describe each alleged discriminatory act. For each action, please include the date(s) the discriminatory act occurred, the name(s) of each person(s) involved and, why you believe the discrimination was because of race, disability, age, sex, etc. Also please provide the names of any person(s) who was present and witnessed the act(s) of discrimination.

George Fox has vague policies implying that behavior reflecting LGBT identity is not permissible on campus. Due to fear of being punished for their sexual orientation, Audrey hesitated to report that they were stalked and sexually assaulted by another student on campus. After Audrey reported the assault to a resident assistant, Audrey was told that the Area Coordinator would file a Title IX complaint on their behalf, but the coordinator never filed it. Audrey had to continue attending school with their assailant. After a fellow student came out on campus very publicly in 2019, Audrey and other students followed by coming out as LGBT. Soon, the president of student government issued a statement in support of LGBTQ students. However, after several weeks, George Fox President Robin Baker issued a statement that the university prohibits same-sex marriage and all sexual conduct outside of heterosexual marriage, putting Audrey and others who came out at the risk of discipline and exclusion. Please see attached declaration.

6. What is the most **recent date** you were discriminated against?

Date: Current, Ongoing

7. If this date is **more than 180 days ago,** you may request a waiver of the filing requirement.

X I am requesting a waiver of the 180-day time frame for filing this complaint.

Please explain why you waited until now to file your complaint.

 <u>1) the Covid-19 pandemic;</u>
 <u>2) The Trump administration's policies and statements about religious exemptions</u> <u>to Title IX;</u>
 <u>3) The Trump administration's policies and statements about Title IX not</u> <u>prohibiting discrimination on the basis of sexual orientation or gender identity.</u>
 <u>4) Although the initial act of discrimination took place more than 180 days ago,</u> <u>Audrey's complaint should not be considered time-barred because George Fox</u> <u>continues to discriminate against Audrey and to promulgate policies and practices</u> <u>that discriminate against LGBTQ+ students.</u> Page 3 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

8. Have you attempted to resolve these allegations with the institution through an internal grievance procedure, appeal or due process hearing?

<u>Yes</u>

If you answered **yes**, please describe the allegations in your grievance or hearing, identify the date you filed it, and tell us the status. If possible, please provide us with a copy of your grievance or appeal or due process request and, if completed, the decision in the matter.

See attached declaration.

9. If the allegations contained in this complaint have been filed with any other Federal, state or local civil rights agency, or any Federal or state court, please give details and dates. We will determine whether it is appropriate to investigate your complaint based upon the specific allegations of your complaint and the actions taken by the other agency or court.

Agency or Court:U.S. District Court - District of Oregon - Eugene DivisionDate Filed:03/29/21Case Number or Reference:6:21-cv-00474-AAResults of Investigations/Findings by Agency or Court:Pending

10. If we cannot reach you at your home or work, we would like to have the name and telephone number of another person (relative or friend) who knows where and when we can reach you. This information **is not required**, but it will be helpful to us.

Not applicable

11. What would you like the institution to do as a result of your complaint — what remedy are you seeking?

<u>Prevent conflicts of interest by separating Title IX officer positions from administrative</u> <u>positions involved in enforcing student codes of conduct/honor code and prevent the</u> <u>sharing of information from Title IX office to administrative offices involved in enforcing</u> <u>student codes of conduct/honor code.</u>

Audrey would also like George Fox's policies amended to state that (1) same-sex dating relationships and displays of affection will be treated by George Fox in the same manner as opposite-sex dating relationships and displays of affection; (2) students will not be punished for coming out as LGBTQ+ or for expressing their sexual or gender identity (through pronouns, clothing, hair, makeup, etc.); (3) George Fox will not encourage or facilitate conversion therapy or any other sexual or gender orientation change efforts; (4) students who report sexual or physical assault will be granted safe harbor from discipline relating to sexual

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Page 4 of 4 – U.S. Department of Education, Office for Civil Rights Discrimination Complaint Form, Consent Form, and Complaint Processing Procedures

activity or other code of conduct violations; and (5) George Fox's nondiscrimination policy includes sexual orientation and gender identity as applied to all aspects of George Fox, including housing and other programs.

12. We cannot accept your complaint if it has not been signed. Please sign and date your complaint below.

(Signature)

07/24/21	
(Date)	
Jul 24, 2021	

(Date)

buty Wyilin sch (Jul 24, 2021 21:05 PDT) (Signature of person in Item 2)

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
· · · ·	Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.	DECLARATION OF AVERY
) BONESTROO
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.	

I, Avery Bonestroo, declare:

- 1. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 2. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 3. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 4. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

EXHIBIT E - BONESTROO through HOEKSTRA AVERY BONESTROO DECLARATION

By: s/ Avery Bonestroo Avery Bonestroo

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,	ý)
V.) DECLARATION OF HAYDEN
) BROWN
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Hayden Brown, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT E - BONESTROO through HOEKSTRA HAYDEN BROWN DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Hayden Brown Hayden Brown

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

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)
) Case No. 6:21-cv-00474-AA
)
) DECLARATION OF BROOK C
)
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I, Brook C, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT E - BONESTROO through HOEKSTRA BROOK C DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Brook C Brook C

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• • •) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.	DECLARATION OF TRISTAN
) CAMPBELL
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Tristan Campbell, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT E - BONESTROO through HOEKSTRA TRISTAN CAMPBELL DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Tristan Campbell Tristan Campbell

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• • •) Case No. 6:21-cv-00474-AA
Plaintiffs,	ý)
V.) DECLARATION OF SAREN
) CRAIG
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
-)
Defendants.)

I, Saren Craig, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT E - BONESTROO through HOEKSTRA SAREN CRAIG DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Saren Craig

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• · · ·) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.	DECLARATION OF ALEX
) DURON
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.	

I, Alex Duron, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 4. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Alex Duron Alex Duron

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B

Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

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IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
•) Case No. 6:21-cv-00474-AA
Plaintiffs,	ý
V.) DECLARATION OF
) MORTIMER HALLIGAN
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Mortimer Halligan, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT E - BONESTROO through HOEKSTRA MORTIMER HALLIGAN DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Mortimer Halligan Mortimer Halligan

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

)
)
) Case No. 6:21-cv-00474-AA
)
) DECLARATION OF RACHEL
) HELD
)
)
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)

I, Rachel Held, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT E - BONESTROO through HOEKSTRA RACHEL HELD DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Rachel Held Rachel Held

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,	ý)
V.) DECLARATION OF LAUREN
) HOEKSTRA
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Lauren Hoekstra, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT E - BONESTROO through HOEKSTRA LAUREN HOEKSTRA DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Lauren Hoekstra Lauren Hoekstra

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• · · · ·) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF JAMIE
) LORD
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Jamie Lord, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT E - BONESTROO through HOEKSTRA JAMIE LORD DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Jamie Lord Jamie Lord

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF
) CAMERON MARTINEZ
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Cameron Martinez, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 3. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 4. Building an affirming community at my college/university/alma mater is a religious exercise for me.

EXHIBIT F - MARTINEZ through WOJNAROWISCH CAMERON MARTINEZ DECLARATION

5. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

Pursuant to 28 U.S.C. §1746, I declare under penalty of perjury that the foregoing is true and correct, and that this declaration was executed this 28th day of July, 2021.

By: s/ Cameron Martinez Cameron Martinez

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
•) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF JOANNA
) MAXON
U.S. DEPARTMENT OF EDUCATION and	ý)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Joanna Maxon, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT F - MARTINEZ through WOJNAROWISCH JOANNA MAXON DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Joanna Maxon Joanna Maxon

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,	
V.	DECLARATION OF DARREN
) MCDONALD
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Daren McDonald, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT F - MARTINEZ through WOJNAROWISCH DARREN MCDONALD DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Darren McDonald Darren McDonald

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF FAITH
) MILLENDER
U.S. DEPARTMENT OF EDUCATION and	ý)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Faith Millender, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 3. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 4. Building an affirming community at my college/university/alma mater is a religious exercise for me.

EXHIBIT F - MARTINEZ through WOJNAROWISCH FAITH MILLENDER DECLARATION

5. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

Pursuant to 28 U.S.C. §1746, I declare under penalty of perjury that the foregoing is true and correct, and that this declaration was executed this 28th day of July, 2021.

By: s/ Faith Millender Faith Millender

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• · · ·) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF JAKE
) PICKER
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Jake Picker, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 4. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.

- 5. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 6. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Jake Picker Jake Picker

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
. , , , , , , , , , , , , , , , , , , ,) Case No. 6:21-cv-00474-AA
Plaintiffs,	ý
V.) DECLARATION OF MEGAN
) STEFFEN
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Megan Steffen, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT F - MARTINEZ through WOJNAROWISCH MEGAN STEFFEN DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Megan Steffen Megan Steffen

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,	
) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF DANIEL
) CHRISTOPHER TIDWELL-
U.S. DEPARTMENT OF EDUCATION and) DAVIS
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Daniel Christopher Tidwell-Davis, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT F - MARTINEZ through WOJNAROWISCH DANIEL CHRISTOPHER TIDWELL-DAVIS DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Daniel Christopher Tidwell-Davis Daniel Christopher Tidwell-Davis

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
•) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.) DECLARATION OF JUSTIN
) TIDWELL-DAVIS
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.	

I, Justin Tidwell-Davis, declare:

- 1. I believe that my sexuality and gender identity are gifts inherent to all people and are to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a sacred union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT F - MARTINEZ through WOJNAROWISCH JUSTIN TIDWELL-DAVIS DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a moral imperative for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious freedom(s) as described in my Declarations and the First Amended Complaint.

By: s/ Justin Tidwell-Davis Justin Tidwell-Davis

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of)
themselves and all others similarly situated,)
• · · · ·	Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.	DECLARATION OF LUCAS
	WILSON
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity)
as Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.)

I, Lucas Wilson, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. When I started at my college/university, I believed that being LGBTQ+ was sinful but I changed that religious belief while at college/university.
- 3. I believe that marriage is a holy union and that it includes same-sex couples.
- 4. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.

EXHIBIT F - MARTINEZ through WOJNAROWISCH LUCAS WILSON DECLARATION

- 5. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.
- 6. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 7. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 8. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Lucas Wilson Lucas Wilson

Timothy R. Volpert (OSB 814074) Tim Volpert PC 2111 NE Hancock St. Ste. 2B Portland, OR 97212 Email: tim@timvolpertlaw.com Phone: 503-703-9054

IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF OREGON EUGENE DIVISION

Elizabeth HUNTER; et al., on behalf of	
themselves and all others similarly situated,)
) Case No. 6:21-cv-00474-AA
Plaintiffs,)
V.	DECLARATION OF AUDREY
) WOJNAROWISCH
U.S. DEPARTMENT OF EDUCATION and)
Suzanne GOLDBERG, in her official capacity as)
Acting Assistant Secretary for Civil Rights,)
U.S. Department of Education,)
)
Defendants.	

I, Audrey Wojnarowisch, declare:

- 1. I believe that my sexuality and gender identity are gifts from God to be celebrated and expressed.
- 2. I believe that marriage is a holy union and that it includes same-sex couples.
- 3. I endured spiritual abuse while at my religious college/university because the beliefs and practices of my college/university regarding sexuality and gender identity attacked and undermined my own religious beliefs about myself and other LGBTQ+ people.
- 4. My religious beliefs require me to reject internalized and externalized homophobia and transphobia.

EXHIBIT F - MARTINEZ through WOJNAROWISCH AUDREY WOJNAROWISCH DECLARATION

- 5. My religious beliefs call on me to protect LGBTQ+ students at my college/alma mater from abuse, violence, and oppression.
- 6. Building an affirming community at my college/university/alma mater is a religious exercise for me.
- 7. The religious exemption to Title IX creates/created a government-imposed burden on my religious beliefs as described in my Declarations and the First Amended Complaint.

By: s/ Audrey Wojnarowisch Audrey Wojnarowisch