

Additional Pertinent Information: _____

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

Witness's Signature: _____ **Date:** _____

Return this completed form to:

Equity Coordinator/Title IX Coordinator/Affirmative Action Coordinator:
Karla Christian, Chief Officer of Human Resources
319-447-3036 / kchristian@Linmar.k12.ia.us

Equity Coordinators:
Nathan Wear, Associate Superintendent (Secondary Level)
319-447-3028 / nathan.wear@Linmar.k12.ia.us

Bob Read, Associate Superintendent (Elementary Level)
319-447-3016 / bread@Linmar.k12.ia.us

Special Education/Student Services Equity Coordinator:
Melissa Frick, Executive Director of Student Services
319-447-3663 / melissa.frick@Linmar.k12.ia.us

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