



Bullying-Harassment-Intimidation Complaint Form

PLEASE PRESS HARD AND PRINT CLEARLY

Name of complainant: _____ Position: _____

Name of alleged student victim: _____ School: _____

Name of alleged perpetrator: _____ Date of incident: _____

Where (exactly) did the incident occur? _____

What occurred? (Describe in as much detail as possible the circumstances and what happened during the incident) Use an additional sheet if necessary:

Name of witnesses (if any): _____

Identify and attach copies of evidence, i.e., letters, photos, etc.: _____

BY SIGNING BELOW, I HEREBY CERTIFY THAT THE INFORMATION LISTED ABOVE IS TRUE AND ACCURATE. I UNDERSTAND THAT I MUST DELIVER THIS COMPLAINT TO THE SCHOOL PRINCIPAL WHO WILL CONDUCT THE INITIAL INVESTIGATION. I ALSO UNDERSTAND THAT I WILL BE SUBJECT TO DISCIPLINE AND/OR PENALTIES FOR KNOWINGLY FILING A FALSE COMPLAINT.

Signature of Complainant

Date

Signature of Person Assisting Complainant
in the Preparation of this Complaint (if applicable)

Relationship to Complainant

***For school purposes only (DO NOT WRITE BELOW THIS LINE)**

Received by: _____ Date received: _____

Investigation initiated? Yes ___ No ___ Complaint entered into E-school/bullying log Yes ___ No ___

Summary of investigation: _____

Outcome of investigation: Unsubstantiated _____ Substantiated _____

Summary of Intervention/Disciplinary measures: _____

