



Student Bullying/Harassment Complaint and Investigation Form

Name of Complainant:

Grade Level:

Date of Complaint:

Name of Alleged Harasser:

Date and Place of Incident or Incidents:

Description of Conduct:

Name of Witnesses:

Evidence of Harassment, i.e., Letters, Photos:

Any Other Information:

I agree that all the information on this form is accurate and true to the best of my knowledge and request that the school district investigate this complaint. I understand that while every effort will be made to maintain my complaint as confidential, the substance of this complaint and my identity may need to be disclosed to the alleged harasser.

Signature

Date