

BULLYING/HARASSING BEHAVIOR COMPLAINT FORM

School: _____

Name(s) and grades(s) of victim(s):

Grade _____

Grade _____

Name and Title of Person Reporting: _____

Relationship to victim: _____

Name(s) of accused: _____

Location of incident: _____

Date and time of incident: _____

Describe what happened and who was present. Use reverse side or attach additional pages, if needed. _____

Other incidents of Bullying:

Dates:

Times:

Name of Accused:

I certify that all information provided in the complaint is true and complete. I understand that any intentional misstatement of fact may subject me to school discipline.

Signature of reporting student: _____ Date: _____

Signature of official receiving complaint: _____ Date: _____

(Reports of student bullying must be submitted to the principal.)