

**East Tallahatchie School District
Complaint Form**

Name of Reporting Person: _____ Sex: _____ Grade: _____

Date of Incident: _____ School: _____ Date of Report: _____

Describe the specific nature of the incident and the location where the incident occurred:

Name/grade of the victim(s) involved in the incident:

Name/grade of the accused in the incident:

_____	_____
_____	_____
_____	_____

Name/grade of any witnesses:

Additional information that will assist in the investigation of the incident:

Signature

Date

Name of person receiving the complaint form

Date

Action taken by principal: _____

Principal's Signature and date