Grades 9-12 and Adult
HARASSMENT/VIOLENCE/BULLYING REPORT FORM

General Statement of School District Policy:
- It is the policy of District 877 to maintain a learning and working environment that is free from harassment and violence.
- It shall be a violation of policy for any student or school personnel to inflict, threaten to inflict or attempt to inflict religious, racial or sexual violence upon any student or school personnel.
- It is the policy of District 877 to prevent and respond to acts of bullying, intimidation, violence and other similar disruptive behavior. It shall be a violation of policy for any student or school personnel to bully.
- The School District will act to investigate all complaints, either formal or informal, verbal or written, of religious, racial or sexual harassment or violence or bullying, and to discipline or take appropriate action against any student or school personnel who is found to have violated these policies.

Complainant
Home Address
Work/School Address
Home Phone Work Phone Cell Phone
Date(s) of alleged incident(s)

Circle prohibited behaviors as appropriate: sexual racial religious bullying violence

Name(s) of person(s) who you believe harassed, or was (were) violent towards you or bullied you.

List any witnesses who were present or who may have information regarding the alleged harassment or bullying.

Where did the incident(s) occur?

Describe the incident in as much detail as possible, including: (1) exactly what was said, including any threats or demands; (2) whether there was physical contact and if so, a detailed description of what occurred; and (3) how you responded to the incident. If there was more than one incident, please describe each incident separately. (Attach additional pages if necessary.)

This complaint is filed based on my honest belief that has harassed; has been violent to me or to another person or has bullied me. Thereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

Complainant's Signature Date
Person Receiving Report Date