

HARASSMENT COMPLAINT FORM

Name _____ Date _____

Address _____

Telephone - Home _____ School/Work _____

Status of person filing complaint:

_____ Student _____ Employee

_____ Parent/Guardian _____ Other

Filing complaint alleging harassment on the basis of “(e.g. sex, race, national origin, etc)”

Statement of complaint (include the type of discrimination charged and the specific incident(s) in which it occurred)

Signature of complainant _____

Date complaint filed _____

Signature of person receiving complaint _____

Date received _____

Submit all copies to the building principal who will sign and date the complaint.

Distribution: 1st copy - Building Principal
2nd copy - Complainant
3rd copy - Guidance Counselor