## SOUTH KORTRIGHT CENTRAL SCHOOL DISTRICT DASA Complaint Form

Name of compl	ainant:			Date Submitted:
Address:				
Home phone: _		Cell:	Work:	(please circle preferred number)
PART I				
The complaint	is: (check all that apply)			
An emplo	yee, holding the position	of	at	(location)
A student	, grade at			(school or location)
	or community member			
Other (ple	ease specify your relations	hip with or associa	tion to the District)	
Basis of this co	mplaint/grievance: (circle	any that apply)		
Race	National Orig	in Disab	ility Sex	Color
Ethnic Group	Gender	Weig	nt Religion Re	eligious Practice
Sexual Orientat	tion Other/Not sur	e (please briefly ex	plain):	
Name and/or de	escription of accused pers	on(s):	<del></del>	
Incident Occur	red: (circle one)			
Auditorium	Boys Locker Room	Classroom	Gymnasium	Playground
Cafeteria	Girls Bathroom	Hallway	Playing Field	Boys Bathroom
Bus .	Girls Locker Room	Parking Lot	Cyber Offense	Other: (please specify)
Incident Occur	red: (circle one)			
	erty At school sponso	red function but of	f school grounds Off	school property (select this only for cyber offense)
Inaidant waar (	airala any that annly)	Cona	related Bi	as Related
merdent was. (	circle any that apply)	Gallg	Telated Di	as iverated
Description of	alleged harassment/bullyi	ng/discrimination/i	ncident:	
				· · · · · · · · · · · · · · · · · · ·
Incident was a	result ofstuc	lent and/or	conduct.	
Incident involv	ed physical o	contact and/or	verbal threats, i	intimidation or abuse.
Date, time and	place of violation(s):			
Witnesses if a	are on others who should b	es contacted with h	maviladaa immartant ta	this investigation, including contact information for
				tims investigation, including contact information for
Others you may	y have discussed this com	plaint/grievance/in	cident with, including co	ontact information for each:
				vhom?
Date			Signature of Compla	ainant

## FOR ADMINISTRATIVE USE ONLY

## Part II - Actions Taken

Actions taken: (circle all that apply) Please include the number of a	lays of in school or out of school suspension.	
Counseling or treatment programs  Teacher removal  Supposition from place or activities	Reprimand Lunch detention Other outside corner	
Suspension from class or activities	Other outside agency	
Out of school suspension		
Transferred to Alternate Education Program	Parent phone call	
Referred to law enforcement or juvenile justice system	Recess privileges revoked	
Other (specify)	<u> </u>	
Consequences determined by:		
Victim(s):		
Witness(es):		
Additional Notes:		
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This form is to be used for complaints based on the Dignity for All Students Act – 8 NYCRR 100.2(kk)