

Bullying/Harassing Behavior Complaint Form

School: _____

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

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 attached additional paper, if needed.

Other incidents of Bullying:

Date	Time	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)