

	ABERDEEN SCHOOL DISTRICT	NEPN Code: JIAA-E
	POLICIES AND REGULATIONS	

HARASSMENT/SEXUAL HARASSMENT REPORT FORM

Complainant Name _____

Home Address _____ Home Phone _____

Date and time of alleged incident(s) _____

Place where alleged incident(s) occurred _____

Name of person you believe harassed you _____

Describe the incident(s) as clearly as possible _____

List any witnesses that were present _____

What action, if any, has been taken? _____

This complaint is filed based on my honest belief that _____ has discriminated against or harassed me based on my _____. I hereby certify the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

Complainant Signature

Date

Received by

Date

REFERENCES: District Policy JIAA
ADOPTED: November 26, 2018
REVISED: August 22, 2022