Complaint of Harassment/Bullying
Reference WSD Policy #3240, Student Conduct, Discipline, Range of Sanctions #16, Harassment WSD Policy #3205,3207,3210,5013,5275

Date of report: __________________________
Person making the complaint of harassment: ____________________________________________
Complaint report completed by: ________________________________________________________

Alleged harasser’s name(s): __________________________________________________________
Check type of harassment being reported:
☐ Sexual harassment  ☐ Race
☐ Religion  ☐ National origin
☐ Threat of harm/bullying  ☐ Gender
☐ Color  ☐ Age
☐ National origin  ☐ Disability
☐ Race  ☐ Gender
☐ Color  ☐ Age
☐ National origin  ☐ Disability
☐ Race  ☐ Gender
☐ Color  ☐ Age
☐ National origin  ☐ Disability
☐ Other (explain) ____________________________________________________________

When and where did this incident happen?
Date: __________________________
Time: __________________________
Place: __________________________
What happened? (Include as many details as possible – attach additional pages if needed)

Were there any witnesses to the incident, or are there students/staff who may have information about this incident?
☐ No  ☐ Yes *If yes, list name(s) ______________________________________________________

Did you do or say anything to respond to the harassment/bullying?
☐ No  ☐ Yes *If yes, describe: ______________________________________________________

List any previous attempts to stop the harassment/bullying(date & what happened):
________________________________________________

Do you think there will be more of this activity?
☐ No  ☐ Yes *If yes, when and where might it happen ______

What would you like to see occur as a result of this report?
________________________________________________

Has anyone contacted law enforcement about this incident?
☐ No  ☐ Yes *If yes, give date, law enforcement agency and name of person who contacted the agency:
________________________________________________

School official investigating report: __________________________ Date ________________

If student(s) are involved, parents MUST be contacted. This means parents of the student(s) being harassed and parents of the student(s) who is doing the harassment.

Action Taken
________________________________________________
________________________________________________
________________________________________________

Signature of complainant: __________________________________________________________ (over→)

06/29/06-BL
Administrative Intervention

School Official Conducting Investigation:  

Findings: 

Action Taken: 

Follow-Up Log: Contact with person harassed:

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<tr>
<th>Date</th>
<th>Person Contacted</th>
<th>Action Taken</th>
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