File: JFHA-F/GBA-F

REPORT OF HARASSMENT

Name of Complainant:			
For Students, School Attendi	ing:		
For Employees, Position and	Location:		
Address, Phone Number and Email Address:			
Date(s) of Alleged Incident(s	s) of Harassment:		
Name of person(s) you believe	ve harassed you or o	others:	
If the alleged harassment war Please describe in detail the incident(s) occurred. Please include a description of any padditional pages if necessary	incident(s) of allege note any witnesses past incidents that m	d harassment, includi	ing where and when the red the incident(s). Please
I certify that the information my knowledge:	provided in this rep	ort is true, correct an	d complete to the best of
Signature of Complainant	Date	_	
Complaint Received By:	(Principal or Com	pliance Officer)	 Date