

PINE CITY INDEPENDENT SCHOOL DISTRICT 578
RELIGIOUS, RACIAL OR SEXUAL HARASSMENT AND VIOLENCE REPORT FORM

Student Harassment Report Form

Pine City Independent School District maintains a firm policy prohibiting all forms of discrimination. Harassment against students or employees is discrimination. All persons are to be treated with respect and dignity. Sexual advances or other forms of personal harassment by any person, male or female, which create an intimidating, hostile or offensive environment will not be tolerated under any circumstances.

Complainant: _____

Grade: _____

Address: _____

Phone: _____ Date of Alleged Incident(s): _____

Name of person you believe harassed you: _____

List of witnesses that were present: _____

Where did the incident(s) occur? _____

Describe the incident(s) as clearly as possible including such things as: what force, if any, was used; any verbal statements (i.e. threats, requests, demands, etc.); what , if any, physical contact was involved. (Attach additional pages if necessary.)

Is there any additional information which may be of assistance to someone investigating the incident? (i.e., Are you neighbors with the harasser? Do you ride the same bus? Have you had classes together?)

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

Complainant signature

Date

Person to whom this report was made

Date