SCHOOL DISTRICT

Huron School District #2-2

Policies and Regulations

Code: ABB-F Bullying/Harassment Formal Complaint Form

Bullying/Harassment Formal Complaint Form

Name of Complainant:	
Name of Complainant:	lying include a rises that formal
disciplinary action may not be based solely on an anonymous report.	
Date of Complaint:	
Name of Alleged Harasser or Bully:	
Date and Place of Incident or Incidents:	
Description of Misconduct:	
Name of Witnesses (if any):	
Evidence of Harassment or Bullying, i.e., letters, photos, etc. (Attach evidence of Harassment or Bullying, i.e., letters, photos, etc.)	ence if possible):
Any Other Information:	
I agree that all of the information on this form is accurate and true to the best of my known	owledge.
Signature Date	