

## **Huron School District #2-2**

## Policies and Regulations

## Code: ACAA-E(1) Sexual Harassment Complaint Report Form

## Sexual Harassment Complaint Report Form

Date Form Co	mpleted:
	ted by:
Person Report	ing the Sexual Harassment:
Address/Phone	e # of the Person Reporting the Sexual Harassment:
which is the ba	inplaint: (With specificity, identify the person(s) alleged to have sexually harassed, the conduct asis of the sexual harassment complaint, when/where the conduct occurred, the person(s) alleged ly harassed, witnesses, and any other pertinent information):
	(use additional sheets if necessary).
Date	School Employee Completing the Sexual Harassment Report Form
Date	Person Reporting the Sexual Harassment

Adopted: 3/30/2015

ASBSD