

EXHIBIT **EXHIBIT**

**STUDENT VIOLENCE / HARASSMENT /
INTIMIDATION / BULLYING**

COMPLAINT FORM

(To be filed with any School District employee who will forward this document to the principal or the principal's designee)

Please print:

Name _____ Date _____

Address _____

Telephone _____ Another phone where you can be reached _____

During the hours of _____

E-mail address _____

I wish to complain against:

Name of person(s) _____

Specify your complaint by stating the problem as you see it. Describe the incident, the participants, the background to the incident, and any attempts you have made to solve the problem. *Be sure to include all relevant dates, times, and places.* Additional pages may be attached if necessary.

