

Sexual Harassment Reporting/Intake Form for Students

School _____ Date _____

Student's name _____

Who was responsible for the harassment or incident(s)?

Describe the incident(s)

Date(s), time(s), and place(s) the incident(s) occurred.

Were other individuals involved in the incident(s)? yes no
If so, name the individual(s) and explain their roles\

Did anyone witness the incident(s)? yes no
If so, name the witnesses.

Did you take any action in response to the incident? yes no
If yes, what action did you take? _____

Were there any prior incidents? yes no

If so, describe any prior incidents.

Signature of complainant _____

Signatures of parents/legal guardians _____

Retaliation is prohibited by federal law and district policy. The identity of the individual signing this form will 50 remain confidential in accordance with law and policy.