



# Orange Beach City Schools

Report of Bullying, Intimidation, Harassment,  
Violence, Suicide and/or Threats Thereof

Name of Student: \_\_\_\_\_ School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Infraction Reported By: _____ Student _____ Parent			
Date of Incident		Time	
Specific Location of Incident			
Description (Be specific and use names/titles, dates, exact location and specific occurrence(s) if appropriate, including any threat of suicide. (Use additional sheets if necessary.)			
Other Information			
What results are you seeking by filing this complaint?			

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

OR

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\*\* Please note that the submission of this complaint does not automatically substantiate that misconduct has occurred. The school administration has a duty to investigate any allegations of wrongdoing.