

**Nooksack Valley School District
Harassment Complaint Form**

Name of complainant: _____

Position of complainant: _____

Date of complaint: _____

Name of alleged harasser: _____

Date and location of incident(s): _____

Description of misconduct: _____

Name of witnesses (if any): _____

Evidence of harassment: (i.e. letters, photo, etc – attach if possible) _____

Any other information: _____

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Complainant's Signature

Date
