



# BULLYING, DISCRIMINATION, AND HARASSMENT COMPLAINT FORM

Nebo School District maintains a firm policy prohibiting all forms of bullying, discrimination, and harassment.

SCHOOL: \_\_\_\_\_

## **VICTIM INFORMATION:**

Name: \_\_\_\_\_ Home Address: \_\_\_\_\_  
Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## **INCIDENT(S) INFORMATION:**

Check the box(es) to indicate the type of conduct you are complaining of:

Bullying/Cyber-Bullying     Discrimination     Harassment     Hazing     Retaliation

Check the box(es) to indicate the basis of the conduct:

Race/Color/National Origin     Sex/Gender     Religion     Disability     N/A or None

Date(s) / Time(s) of incident(s): \_\_\_\_\_

Name(s) of alleged perpetrator(s): \_\_\_\_\_

Location of incident(s): \_\_\_\_\_

Name(s) of witness(es): \_\_\_\_\_

**Describe the incident(s) as clearly as possible, including what was said (threats, requests, demands, etc.), whether any physical contact occurred, and what force was used (attach additional pages if necessary):**

**Describe the harm caused by the incident(s) described above, including any hostile school environment, or other adverse effects on your education (attach additional pages if necessary):**

**Describe the remedy you seek, including any assistance you may need to address the harm described above (attach additional pages if necessary).** [Please note that seeking a particular remedy does not confer authority on the victim to determine the discipline imposed on the alleged perpetrator. All remedies, including any disciplinary action, are within the exclusive authority and sole discretion of the School District]:

This complaint is based on my honest belief that I have been bullied, discriminated against, or harassed as described above. I hereby represent that the information provided herein is true, correct, and complete to the best of my knowledge.

Victim's signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the victim is unable or unwilling to complete and sign this form, provide the following information and sign below.

Name of person completing form: \_\_\_\_\_ Title: \_\_\_\_\_

Reason victim did not complete and sign form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Information for Persons Filing a Complaint**

#### Overview of Investigative Process

The Coordinator of Student Services will be promptly notified of this complaint. The Building Administrator will determine whether to conduct a site-level or District-level investigation. If additional information from you is needed, you will be contacted for a follow-up interview. The investigation will also include interviews with, and written statements from, the victim, the person against whom the complaint is made, witnesses, and others identified as having pertinent information.

The investigator will consider all the evidence and will make findings of fact and conclusions as to whether any District policies have been violated. In the case of policy violation, disciplinary action may be taken against the perpetrator. Other actions may be taken to address the effects on the victim and the school environment. To the extent legally permissible, the victim and the perpetrator will be notified of these decisions.

#### Confidentiality

The investigation will be conducted in a reasonably confidential manner. However, witnesses and others with pertinent information may need to be made aware of the investigation and sufficient facts to elicit their verbal/written statements. The investigator will take measures to protect confidentiality of the victim and the accused, including directing all witnesses to refrain from disseminating information related to the complaint and investigation.

You should also keep the complaint and investigation confidential. Do not attempt to conduct your own parallel investigation or discuss the facts of your complaint with others.

#### No Contact

You should avoid contact with the accused. This includes written, electronic, verbal, and in-person contact. If contact with the accused is unavoidable in the school, please notify the investigator.

#### **For School Use Only**

*Maintain original at school in investigation file. Submit copy to Coordinator of Student Services*