

Hollandale School District

Bullying/Harassing Behavior Student Complaint Form

Complaint forms will be available from the counselor or administrator or online. Once completed, the principal or designee will handle all complaints.

Your Right to File a Complaint:

It is the policy of the Hollandale School District (JDDA-P – Bullying Procedures), that students and employees in the Hollandale School District are protected from bullying or harassing behavior by other students or employees. It is the intent of the Board and the administration to maintain an environment free from bullying and harassing behavior. All charges of bullying, discrimination, harassment, and retaliation are taken very seriously. The District will make every reasonable effort to handle and respond to charges and complaints filed in a fair, thorough, and just manner. Every reasonable effort will be made to protect the due process rights of victims and alleged offenders.

Any student, school employee or volunteer who feels he/she has been a victim of bullying or harassing behavior, or has witnessed or who has reliable information that a student, school employee or volunteer has been subject to bullying or harassing behavior shall report such conduct to a teacher, principal, counselor or other school official. The report shall be made promptly but no later than five (5) calendar days after the alleged act or acts occurred.

Instructions:

Use the accompanying form to report bullying, harassment, discrimination and retaliation so that school officials may investigate and take appropriate steps to increase your safety. Complete the form providing as much detailed information as possible so that the complaint may be properly investigated. It is important that you report the facts as accurately and completely as possible and that you cooperate fully with the persons designated to investigate the complaint.

Where to file:

The report shall be given promptly to the principal or superintendent who shall institute an immediate investigation. Complaints against the principal shall be made to the superintendent and complaints against the superintendent shall be made to the Board chairman. The complaint shall be investigated promptly. Parents will be notified of the nature of any complaint involving their student. The District official will arrange such meetings as may be necessary with all

concerned parties within five (5) working days after initial receipt of the complaint by the District.

Confidentiality:

To conduct an investigation in a confidential manner, the school will disclose the contents of your complaint only to those persons who have a need to know of the complaint. In signing the complaint form, you authorize the disclosure, as needed, of the information you have provided, and may provide in the future, regarding your complaint. Your complaint form will not be shown to the accused student.

Retaliation prohibited:

Retaliation against a person who files a formal complaint is strictly prohibited and is grounds for disciplinary action.

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Bullying/Harassing Behavior Student Complaint Form

VICTIM NAME (last, first, middle):	SEX	GRADE
ACCUSED NAME (last, first, middle):	SEX	GRADE
SCHOOL SITE/DEPARTMENT (or site where incident occurred):		
INCIDENT DATE:		
WITNESS:		
WITNESS:		
WITNESS:		

Please list all witnesses including students and/or staff.

Type of Alleged Harassment

- Racial
- Sexual Orientation
- Gender
- Disability

Frequency of Harassment

- Yes, this is a repeated offence.
- No, this is a one-time incident.

Type of Injury

- Yes, the incident involved physical injury.
- No, physical injury was not involved.

Check all spaces below that apply. Inappropriate behaviors include:

<input type="checkbox"/> Gesture, written, or verbal expression	<input type="checkbox"/> Verbal fight <input type="checkbox"/> Written or verbal threat <input type="checkbox"/> Written note <input type="checkbox"/> Written or verbal rumors <input type="checkbox"/> Seclusion <input type="checkbox"/> Embarrassing the student <input type="checkbox"/> Other: <hr/>
<input type="checkbox"/> Physical Act	<input type="checkbox"/> Physical fight <input type="checkbox"/> Physical injuries <input type="checkbox"/> Others: <hr/>
<input type="checkbox"/> Electronic communication	Identify the component used: <input type="checkbox"/> Cell phone <input type="checkbox"/> Audio or visual image <input type="checkbox"/> Instant message/email <input type="checkbox"/> Gaming <input type="checkbox"/> Social Networking <input type="checkbox"/> Blog <input type="checkbox"/> Other: <hr/>
<input type="checkbox"/> Damage of student's property	<input type="checkbox"/> Property damage <input type="checkbox"/> Stolen or missing property <input type="checkbox"/> Other: <hr/>
<input type="checkbox"/> Reasonable fear of harm to person or property	<input type="checkbox"/> Fear of harm to person <input type="checkbox"/> Fear of harm to property <input type="checkbox"/> Other: <hr/>

<p><input type="checkbox"/> Disrupt or interfere with school's educational mission or the education of student.</p>	<p><input type="checkbox"/> Changes in attendance: absences, tardies</p> <p><input type="checkbox"/> Missing classes/parts of school day</p> <p><input type="checkbox"/> Changes in grades</p> <p><input type="checkbox"/> Changes in participation of school activities</p> <p><input type="checkbox"/> Avoidance of elements: lunch, bus, recess</p> <p><input type="checkbox"/> Other: _____</p>
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Additional details of the incident:

Was the affected student absent from school as a result of this incident?

- Yes
- No

What was the reason? _____

How many days? _____

Signature of student/parent: _____ Date: _____

Signature of person completing complaint if not student/parent:
_____ Date: _____

Signature of school official receiving complaint:
_____ Date: _____