

**Notice Form 3225-NF(1): Sexual Harassment of Students - Harassment Reporting Form for Students**

**Status:** ADOPTED

**Original Adopted Date:** 11/10/2020 | **Last Reviewed Date:** 11/10/2020

**Sexual Harassment Reporting/Intake Form for Students**

This form is not required. Complaints may be submitted in any manner noted in Policy 3225. The form may be used by the

Title IX Coordinator to document allegations.

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 remain confidential in accordance with law and policy.*

---