

CITRUS COUNTY SCHOOLS
FORM A – ALLEGED BULLYING/HARASSMENT COMPLAINT REPORT

To file a complaint of an alleged bullying/harassment incident, complete this form and submit it to the principal and/or building administrator where the alleged incident took place.

PLEASE PRINT

Alleged victim(s) name	
Alleged perpetrator(s) name	
Location alleged incident occurred	
Date alleged incident occurred	Time alleged incident occurred

Describe in as much detail as possible what you witnessed. _____

Were there any witnesses? If so, please provide names, detailed information, and if possible, a method to contact them. _____

If you have any evidence of bullying (e.g. letters, photos, etc.), please attach.

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

 Print and sign your name (optional, if reporting anonymously)

 Date

 Report received by

 Date

Do not write in this section – School use only

- Within the scope of the District Bullying/Harassment Policy 5.321 (Enter appropriate violation code into Skyward)
- Outside the scope of the District Bullying/Harassment Policy 5.321 and possibly a criminal act
- Outside the scope of the District Bullying/Harassment Policy 5.321 but within the scope of the Code of Student Conduct
 ~ Action taken _____

- Outside the scope of the District Bullying/Harassment Policy 5.321 and the Code of Student Conduct
 ~ Explanation _____

 Principal's Signature

 Date