

**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