

# BULLYING, DISCRIMINATION, AND HARASSMENT COMPLAINT FORM

Weber School District maintains a firm policy prohibiting all forms of bullying, including bullying, cyber-bullying, discriminatory harassment, hazing, retaliation, and sexual harassment.

SCHOOL:			
COMPLAINANT NAME:	<u>co</u>	MPLAINANT GRADE	LEVEL:
RESPONDENT(S) NAMES(S):*			
*Please list all p	ersons involved in the bullying	g	
INCIDENT(S) INFORMATION:			
Check the box(es) to indicate the type of cor	nduct you are complaining o	of:	
<ul> <li>□ General Bullying</li> <li>□ Sexual Harassme</li> <li>□ Cyber-Bullying</li> </ul>	ent 🗆 Harassment	□ Hazing	□ Retaliation
Check the box(es) to indicate the basis of the	e conduct:		
□ Race/Color/National Origin □ Sex/Gen	der 🛛 Religion	Disability	□ N/A or None
Date(s) / Time(s) of incident(s):			
Name(s) of alleged respondent(s):			
Location of incident(s):			
Name(s) of witness(es):			
Is this a repeat offense: $\Box$ Yes $\Box$ No			
Describe the incident(s) as clearly as possil any physical contact occurred, and what for	-	-	· · · · · · · · · · · · · · · · · · ·

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 anyone to determine the discipline imposed on the alleged respondent. 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.

Complainant's		
signature:	Date:	

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

Name of person completing form:	Title:
Reason target did not complete and sign form:	
Signature:	Date:

# **Information for Persons Filing a Complaint**

# Overview of Investigative Process

The Bullying Investigator will be promptly notified of this complaint. The District Director of Equity, Justice and Inclusion will also be notified if this is a complaint of discrimination or harassment. 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 target, the person against whom the complaint is made, witnesses, and others identified as having pertinent information.

The Bullying 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 respondent. Other actions may be taken to address the effects on the target and the school environment. To the extent legally permissible, the target and the respondent 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 Bullying Investigator will take measures to protect confidentiality of the target 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.

### Office for Civil Rights

In addition to filing a complaint with the District, you may also contact the U.S. Department of Education, Office for Civil Rights, 1244 Speer Boulevard, Suite 310, Denver, CO 80204-3582; Telephone No. 303-844-5695; Fax No. 303-844-4303; TDD No. 877-521-2172; Email OCR.Denver@ed.gov.

For School Use Only
Maintain original at school in investigation file. Submit copy to Coordinator of Student Services.