

If there is anyone who could provide more information regarding this complaint, please list their name(s), address(es) and phone number(s)

Name	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The projected solution:

Indicate what you think can, and should, be done to solve the problem. Be as specific as possible.

Please be advised that reprisal by any student or staff member directed toward a student or employee related to reporting of a case of bullying, or suspected bullying, shall not be tolerated, and the individual(s) will be subject to disciplines set out in applicable District policies and administrative regulations.

Please be aware that knowingly submitting false reports shall subject students to disciplinary action up to long term suspension or expulsion.

I certify this information is correct to the best of my knowledge.

Signature of Complainant: _____ Date: _____

Document received by: _____ Date: _____

Investigating Official: _____ Date: _____