FILE: JCDD

## **Harassment Complaint Form**

Name of Complainant:  Name(s) of Alleged Perpetrator:	
I have read the above information and certify it to b	e true.
Complainant's Signature (Student or Legal Guardian of Student)	Date Complaint Filed
II. Results of Investigation and Administrative	e Response:
Principal/Administrator's Signature	Date of Complaint Resolution

## III. Policy Provision for Threat of Suicide:

If a threat of suicide is reported, the principal will inform the student's parent or legal guardian of the report and document the threat and administrative response to the threat of suicide on this form.

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