# Bullying/Harassment Complaint Form

To submit a bullying or harassment complaint, follow your school’s complaint process. You can find the steps in the student handbook, on the school website, in the school board policies, or at the school office. If your school does not have a complaint form, you may use this one. Submit the completed form to the school contact listed in your school’s policy.

***Do not submit this form to the Iowa Department of Education.***

## Complaint Information

Name of Student Target: Click or tap here to enter text.

Name of Complainant (person submitting complaint) (if not student): Click or tap here to enter text.

Relationship to Student (if not student): Click or tap here to enter text.

## Describe Incident(s)

Who has been bullying or harassing against the student mentioned above: Click or tap here to enter text.

Describe the incident(s). Include specific details such as date, time and location of the incident(s). (attach additional pages if needed):

Click or tap here to enter text.

Provide the names of the **adults** who may have witnessed the incident(s) (if any):

Click or tap here to enter text.

Provide the names of the **students** who may have witnessed the incident(s) (if any):

Click or tap here to enter text.

What method was reportedly used for the alleged bullying and/or harassment? (check all that apply)

[ ]  Physical

[ ]  Written

[ ]  Verbal

[ ]  Electronic (cyberbullying)

[ ]  Social/Relational (ostracizing, exclusion)

Has the alleged incident(s) impacted the alleged target in any of these ways? (check all that apply)

[ ]  Placed the student in reasonable fear of harm to their person or property

[ ]  Has been substantially detrimental to the student’s physical or mental health

[ ]  Has had the effect of substantially interfering with the student’s academic performance

[ ]  Has had the effect of substantially interfering with the student’s ability to participate in or benefit from the services, activities, or privileges provided

## Contact Information for Student’s Parent/Guardian/Legal Custodian

Parent/Guardian/Legal Custodian Contact Name: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Email: Click or tap here to enter text.

Physical Address: Click or tap here to enter text.

Does student currently reside with this parent/guardian/legal custodian?? [ ]  Yes [ ]  No

2nd Contact Name: Click or tap here to enter text.

2nd Contact Phone Number: Click or tap here to enter text.

2nd Contact Email: Click or tap here to enter text.

2nd Contact Physical Address: Click or tap here to enter text.

Does student currently reside with this parent/guardian/legal custodian?? [ ]  Yes [ ]  No

*If there are additional or alternative contacts, provide contact information here:*

## Statement and Signature

I’m signing this document agreeing that all of the information I have provided on this form is true and accurate based on my current understanding, knowledge, and/or experience.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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