

Policy of the Board of Trustees

G Series

GBAA-R

PROHIBITION OF HARASSMENT, INTIMIDATION & BULLYING Reporting Form

Please print:	
Name_	Date
Address	
Telephone	or number where you may be contacted
I wish to register a complain Name of person/s:	nt against the following:
	stating the problem as you see it. Describe the incident, participants, and any attempts you have made to resolve the problem. Please note relevant
Indicate if there are other pe Name Address Telephone N	eople who could provide more information regarding your complaint:
Proposed Solution: Indicate your opinion on ho	w this problem might be resolved. Be as specific as possible.
I certify that there is no false best of my knowledge.	ification of the above information and events are accurately depicted to the
Signature of Complainant	
Date	
Please return the original co	impleted form to the Principal A copy of this will be provided to the

complainant.

LEGAL REF: ED 303.01(j), 1-9

1st Reading: October 20, 2011 2nd Reading: December 15, 2011 Adoption: January 24, 2012

Proposed Reconsideration: January 2016