DALE COUNTY BOARD OF EDUCATION

STUDENT BULLYING/HARASSMENT COMPLAINT FORM

**NOTE: IF YOU ARE REPORTING A SUICIDE THREAT, PLEASE FILL OUT THE INFORMATION REQUESTED ON THE SECOND PAGE OF THIS FORM.

Name of Student Registering Complaint			
	Last	First	MI
Student ID#			
School:			
Infraction Reported By:Student	Parent/Gua	ırdian	
Date of Incident		Time:	
Description/Other Information/Please used attachments if necessary:			
The Jamari Terrell Williams Student Be continuous pattern of intentional behav school-sponsored function including, be physical acts that are reasonably perceivassociation of a student with an individinto one of the categories of personal character of Education. To constitute bullying, a pattern of behave a Place a student in reasonable fear of behave the effect of substantially interfor a student. c. Have the effect of substantially disrued. Have the effect of creating a hostile of at a school-sponsored function. e. Have the effect of being sufficiently stantially, or abusive educational environments.	ior that takes place ut not limited to, of ved as being motival who has a partharacteristics contravior may do any harm to his or her fering with the edupting or interfering environment in the severe, persistent,	e on school property, or cyberbullying or writte vated by any character ticular characteristic, it ained in the policy add of the following: person or damage to ha ucational performance, g with the orderly open e school, on school pro-	on a school bus, or at a con, electronic, verbal, or istic of a student, or by the f the characteristic falls opted by the Dale County his or her property. The opportunities, or benefits or property, on a school bus, or operty, on a school bus, or
Student			Data
Or Parent/Guardian			Date:

**Please note that the submission of a complaint does not automatically substantiate that misconduct has occurred. The school administration has the prerogative to investigate any allegations of wrongdoing.

DALE COUNTY BOARD OF EDUCATION

SUICIDE THREAT REPORT FORM

SUICIDE THREAT: IF YOU OR SOMEONE ELSE HAVE THREATENED SUICIDE, PLEASE PROVIDE AS MUCH INFORMATION AS POSSIBLE AND <u>IMMEDIATELY</u> NOTIFY YOUR SCHOOL PRINCIPAL AND/OR GUIDANCE COUNSELOR

Who Threatened Suicide?
When was the threat made?
Where was threat made?
Where is this person now?
Does this person have a weapon on campus?
Name of witnesses/students aware of this situation.
Other details of threat?
(Signature of Student or Legal Guardian)
Received by on this day of, 2 (Administrator or Counselor)