Wittenberg-Birnamwood School District

Student Harassment/Discrimination Complaint Form

Name of Person Reporting Incident:
Date of Report:
Name of other person(s) involved in harassment/discrimination complaint:
When did this occur? (day, time, multiple days)
Where did the harassment/discrimination happen? (be specific/explain)
List Witnesses.
Is this the first time the harassment/discrimination happened? If not, explain the incident(s). Have you reported past issues with this situation/person/people (explain)?
Explain the incident(s) in detail. Be complete - you can add additional pages or information. If someone assisted you in writing/explaining please indicate.

Is there any other information that you think	x is relevant to this complaint?
Person Reporting the Above Informati	ion:
Printed Name	
Signature School Employee Section:	Date

Check the type of harassment/discrimination being reported:

□Sex	□Race	□Disability	□Religion	□Sexual Orientation	
□National	l Origin	□Ancestry	\Box Creed	□Pregnancy, Marital or Parental	
	on Proces			1.	
	e school set		Yes	No Explain	
Board of 1	Education A	Action	Yes	No Outcome	
Outside A	gency Invo	lved	Yes	_ No Agency	
School En	mployee:		nted Name	Title	
School En	mployee: _		Signature	Date:	