

Harassment Witness Statement Form

This report **MUST** be completed when there is a witness to an incident of alleged harassment. (For the purpose of this form, harassment also includes violence, threats of violence, or intimidation by another student.) This form should be submitted to the principal or the principal's designee by personal delivery.

| WITNESS' NAME (Last, First) | WITNESS' TITLE (ex: Parent, Student, or Teacher) | | INTERVIEW DATE | |
|---|--|---------------------------|----------------|--|
| | (ex. Fale | int, Student, or Teacher) | | |
| VICTIM'S NAME (Last, First) | | | | |
| | | | | |
| ACCUSED'S NAME (Last, First) | | | | |
| 2011001 OITE WILEDE MOIDENT 2001 | IDDED | COLLOGI TELEBUONE | . AUIMPED | |
| SCHOOL SITE WHERE INCIDENT OCCURRED (i.e., locker room, playground, cafeteria, classroom, etc.) | | SCHOOL TELEPHONE NUMBER | | |
| | | | | |
| PRINCIPAL'S NAME | | DATE OF INCIDENT | | |
| | | | | |
| Describe the incident witnessed: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Describe the location where the incident took place: | | | | |
| <u> </u> | | | | |
| | | | | |
| | | | | |
| | | | | |

| List any other witness' names and grades: | | | | |
|--|-----------------------------------|--|--|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| List evidence of harassment (i.e., letters, pictures, etc.) Attach | all listed evidence, if possible: | | | |
| | | | | |
| | | | | |
| | | | | |
| I agree that all of the information on this form is accurate and true to the best of my knowledge. | | | | |
| Signature of witness | Date | | | |
| Name of person receiving Harassment Witness Form | Date | | | |