



**Tell Your School/Make a Report
(Complaint/Reporting Form)**

**Student-to-Student Discrimination, Harassment, Intimidation and/or Bullying
(Chancellor’s Regulation A-832) or Sexual Harassment (Chancellor’s Regulation
A-831)**

Please include as much information as you can about the incident you are reporting. If you need help or have questions about this form, please talk with your school’s SHP Liaison or RFA Liaison.

Your Name (person filling out this form):

What Happened

Please describe what happened, and tell us as much as you know as clearly and with as much detail as possible (use additional pages if necessary):

Name(s) of the students involved:

When (what date and time(s) this happened, if you know)?

Where did this happen (if you know)?

Did this happen online or electronically (such as cell phone or other wireless handheld device, computer/other device, email, social media, blogs, texting, apps, chat rooms, gaming systems)?

Yes No

If yes, where?

Witnesses

Please list the names of anyone else who saw or may have information about the incident, or who know about what happened:

Your School's Name:

Your School's Borough:

Reason for Making this Report

1. Another student did something to me/my child, which I believe was (check all that apply):

discrimination

harassment, intimidation and/or bullying

sexual harassment.

2. I saw or heard about a student who did something to another student (not to me/my child), and I believe it was (check all that apply):

discrimination

harassment, intimidation and/or bullying

sexual harassment

3. If you believe that the incident was bias-based or had to do with discrimination, check off the kind(s) of bias/discrimination you believe this was (check all that apply):

- Color
- Race
- Creed
- Religion
- Disability
- Retaliation (for complaint)
- Ethnicity
- Weight
- National Origin
- Citizenship/Immigration Status
- Gender
- Gender Identity
- Gender Expression
- Sexual Orientation

4. Have you told any adults who work in your school/at the DOE about this?

Yes No

Who?

When?

Signature:

Date: