EXHIBIT EXHIBIT

## STUDENT VIOLENCE / HARASSMENT / INTIMIDATION / BULLYING

## COMPLAINT FORM

(To be filed with any School District employee who will forward this document to the principal or the principal's designee)

Please print:	
Name Date	
Address	and.
Telephone Another phone where you can be reached	_
During the hours of	
E-mail address	
I wish to complain against:	
Name of person(s)	_
Specify your complaint by stating the problem as you see it. Describe the incident, background to the incident, and any attempts you have made to solve the problem. Explain the problem are levant dates, times, and places. Additional pages may be attached if necessary.	Be sure to include all
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	<del></del>

If there is anyone address(es), and telep	who could provide more information of the second provide more information when the second provide more information which is second provide more information when the second provide more information when	ormation regarding this comp	plaint, please list name(s),
Name Address	Telephone Number		
The projected solut	ion:		
Indicate what you thi	ink can and should be done to s	solve the problem. Be as spec	ific as possible.
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I certify this informat	ion is correct to the best of my	knowledge.	
Signature of Complain	nant	Date	
Document received b	У	Date	
Investigating official		Date	