

# BLOUNT COUNTY SCHOOLS

## Complaint Report Form

### Bullying, Harassment, Threats and/or Intimidation

This report **MUST** be completed to file a complaint relating to an incident of alleged bullying, etc. and turned in to the school Principal/designee of the victim's home school or the appropriate area/district office.

|                                                                                            |                    |       |
|--------------------------------------------------------------------------------------------|--------------------|-------|
| Complainant or Witness Name (last, first) check here if anonymous <input type="checkbox"/> | Sex                | Grade |
| Victim Name (last, first)                                                                  | Sex                | Grade |
| Accused Name (last, first)                                                                 | Sex                | Grade |
| Location of Incident(s)                                                                    | School Name        |       |
| Principal/Administrator                                                                    | Incident Date/Time |       |

Describe the incident, location, witnesses and evidence: (attach pages and evidence if necessary):

Has the victim expressed suicidal thoughts that indicate they may hurt themselves or others? If yes, explain.

I agree that all of the information on this form is accurate and true to the best of my knowledge.

\_\_\_\_\_  
Signature of complainant/victim/witness

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Principal/designee

\_\_\_\_\_  
Date

To be completed by school official

|                       |            |
|-----------------------|------------|
| Action taken and date | Resolution |
|-----------------------|------------|