Nicasio School District
5555 Nicasio Valley Road, Nicasio, CA 94946
☎ 415.662.2184 / 🖹 415.662.2250 / www.nicasioschool.org

HARASSMENT REPORT FORM

It is the intent of the Board of Trustees to provide a process for students, parents, and members of the community to address complaints of harassment to appropriate district personnel and to receive a prompt response to this complaint without fear of retaliation.

Name of Student: _____ Date of Report: _____

Parent/Guardian/Community member: _____
(Filing this complaint on behalf of a student)

Person(s) your complaint involves: _____

Date(s) of Incident: _____

Where did the incident take place? _____

Did you report this incident? ❑Yes ❑No

When? _____

Please describe your complaint in as much detail as possible. (Use extra sheets of paper if necessary.) Attach any documents related to this complaint.

_____
Signature of Parent/Guardian/Community member