

## DISCRIMINATION, HARASSMENT AND/OR BULLYING COMPLAINT FORM

(Return this form to the designated Dignity Act Coordinator listed below)

**Jefferson Elementary: Emily Rose**  
**518-355-1342 ext. 5080**

**Middle School: Meghan Holdsworth**  
**518-355-6255 ext. 2003**

**High School: Kelsey Heck**  
**518-355-6110 ext. 3032**

The purpose of this form is to inform the district of an incident or series of incidents of discrimination, harassment and/or bullying so we can investigate and take appropriate action. If you feel unsafe, or if your child feels unsafe, fill out this form, and we urge you to speak directly with one of our Dignity Act Coordinators by either visiting the school office or calling your building Dignity Act Coordinator as soon as possible so we can address your concerns.

**Complainant Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Circle one:**      Staff                  Student                  Parent                  Other \_\_\_\_\_

**Victim Name (if not the complainant):** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Date(s) of Incident:** \_\_\_\_\_

**List the name(s) and grade(s) of the individual(s) accused of bullying and/or harassment.**

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**Where did the incident happen: (Choose all that apply)**

\_\_\_\_\_ On School Property                  \_\_\_\_\_ On a School Bus                  \_\_\_\_\_ Technology (Social Media, Cell Phone, Computer etc.)  
\_\_\_\_\_ On the way to/from school                  \_\_\_\_\_ At a school sponsored activity or event off school property (specify below)  
\_\_\_\_\_ Other \_\_\_\_\_

**Please check the statement(s) that best describe what happened: (Choose all that apply)**

- \_\_\_\_\_ Any bullying, cyberbullying, harassment, or intimidation that involves physical aggression.
- \_\_\_\_\_ Getting another person to hit or harm the student
- \_\_\_\_\_ Teasing, name calling, making critical remarks, or threatening, in person or by other means.
- \_\_\_\_\_ Demeaning and making the targeted student(s) the victim of jokes
- \_\_\_\_\_ Making rude and/or threatening gestures
- \_\_\_\_\_ History of excluding or rejecting the student
- \_\_\_\_\_ Intimidating (Bullying), extorting or exploiting
- \_\_\_\_\_ Spreading harmful rumors or gossip
- \_\_\_\_\_ Electronic Communication (Please Specify) \_\_\_\_\_
- \_\_\_\_\_ Other (Please Specify) \_\_\_\_\_

**Were there any witnesses?** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**      **If yes, please list the individuals.**

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**Please describe any issues you have had with the student(s) in the past.**

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*Note on Confidentiality: In order to investigate the complaint, the district will disclose the content of the complaint only to those persons who have a need to know. This form will not be shown to the accused student(s)/staff.*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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*I certify that all statements on this form are accurate and true to the best of my knowledge.*

***(Please return this form to the designated Dignity Act Coordinator for your school building)***

**Note on Confidentiality:** In order to investigate the complaint, the district will disclose the content of the complaint only to those persons who have a need to know. This form will not be shown to the accused student(s)/staff.