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3 **Harassment Reporting Form for Employees**

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5 School \_\_\_\_\_ Date \_\_\_\_\_

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7 Employee's name \_\_\_\_\_

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9 • Who was responsible for the harassment or incident(s)? \_\_\_\_\_

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11  
12 • Describe the incident(s). \_\_\_\_\_

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15  
16 • Date(s), time(s), and place(s) the incident(s) occurred. \_\_\_\_\_

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20 • Were other individuals involved in the incident(s)?  yes  no  
21 If so, name the individual(s) and explain their roles. \_\_\_\_\_

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26 • Did anyone witness the incident(s)?  yes  no  
27 If so, name the witnesses. \_\_\_\_\_

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31  
32 • Did you take any action in response to the incident?  yes  no  
33 If yes, what action did you take? \_\_\_\_\_

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38 • Were there any prior incidents?  yes  no  
39 If so, describe any prior incidents. \_\_\_\_\_

40  
41  
42  
43 Signature of complainant \_\_\_\_\_