

**Barbour County Schools**  
**Bullying, Harassment, Intimidation and Sexual, Racial or**  
**Ethnic/Religious Harassment or Violence Reporting Form**

This form is used to report conduct which may violate Barbour County Policies 8420/2300/2310/6110. This form is to only be used in accordance with County and State Policy.

**Complaint Number (Office Use Only):** \_\_\_\_\_ - \_\_\_\_\_ . \_\_\_\_\_ . \_\_\_\_\_

The complaint number is unique for each school and incident. Put the school year followed by the school code and the incident number (Ex. 10-11.303.001; 10-11.303.002; etc...).

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Notified by:** Telephone – In Person – Writing – Other

**Name of Complainant** (Person Reporting Violation): \_\_\_\_\_

**Title of Complainant (Circle One):**

Student    Teacher    Parent    Administrator    Other Staff Member    Other: \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**Name of Person Completing form:** \_\_\_\_\_

**Circle one if different from above:**

Student    Teacher    Parent    Administrator    Other Staff Member    Other: \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone:** Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

**Description of Incident (Name the victim. Describe what happened. Identify who was involved. Identify any witnesses who saw the incident):**

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**Have you reported this or similar behavior before?** \_\_\_ Yes \_\_\_ No. If yes, indicate to whom and the date:

**To whom reported:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please provide the names(s) of any other person(s) who may have knowledge of this incident:**

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**I affirm that the foregoing is a true and accurate account of my observations. I believe the relevant information that I have given above describe a violation of the Bullying, Harassment, Intimidation, and/or Sexual, Racial or Ethnic/Religious Harassment or Violence Policy.**

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received by:

\_\_\_\_\_  
Position

\_\_\_\_\_  
Date