

**Malta Public Schools
Harassment Report Form for Students**

3225F

Student's Name _____ Date _____

(If you feel uncomfortable leaving your name, you may submit an anonymous report, but please understand that an anonymous report will be much more difficult to investigate. We assure you that we'll use our best efforts to keep your report confidential.)

Who was responsible for the harassment or incident(s)? _____

Describe the incident(s). _____

Date(s), time(s), and place(s) the incident(s) occurred. _____

Were other individuals involved in the incident(s)? _____ yes _____ no

If so, name the witnesses. _____

Did you take any action in response to the incident? _____ yes _____ no

If yes, what action did you take? _____

Were there any prior incidents? _____ yes _____ no

If so, describe any prior incidents? _____

Signature of complainant

Signatures of parents/legal guardian

Signature of Administrator

Date Received