



THE SCHOOL BOARD OF BREVARD COUNTY, FLORIDA
STUDENT (ALLEGED VICTIM) COMPLAINT REPORTING FORM

DIRECTIONS: For a report of student-related bullying, sexual harassment, other forms of harassment, teen dating violence and abuse, and/or Title IX, this form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g.

A student (alleged victim) can report a complaint by talking to an adult at school or completing this form and returning it to the dean, assistant principal, or principal. A student can place this form in the school's drop off spot for anonymous reporting. If giving an oral report, a school administrator should complete this form.

Today's Date: \_\_\_/\_\_\_/\_\_\_ School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

Your Name: \_\_\_\_\_ Contact Email: \_\_\_\_\_
(Please print)

Who is bothering you?
\_\_\_\_\_

Nature of Complaint (tell what happened): Choose all that apply and describe the exact words or behaviors used under "Other".

- Teasing, Hitting or kicking, Gossip and rumors being spread, Made fun of, Name calling, Being left out on purpose, Shoving or pushing, Getting you in trouble, E-mail, text message, social media, Gender Discrimination, Sexual Harassment, Relationship/Dating Violence, Sexual Assault, Other (please specify)

Describe what happened. Attach a separate sheet, if necessary. \_\_\_\_\_

When did this happen? Date(s): \_\_\_\_\_

Where did this happen? Choose all that apply.

- School playground, School restroom, On a school bus, School classroom, School hallway, School cafeteria, At a school bus stop, Off Campus/Other location, Other school location, At a school related or sponsored program or activity

How many times has this happened before? \_\_\_\_\_

Have you reported this problem to your teacher, principal, or other school staff before?

- Yes No

If yes, to whom was it reported and what occurred in the past? Attach a separate sheet, if necessary. \_\_\_\_\_

What have you done to try to stop his/her behavior? \_\_\_\_\_

Is there anyone who witnessed this behavior? \_\_\_\_\_

Do you have any documentation, pictures, texts, etc., to support your complaint? Yes No - If yes, attach to this form

How has this behavior affected you? \_\_\_\_\_

What would you like us to do to help? \_\_\_\_\_

I certify that, to the best of my knowledge and belief, that the information provided by me on this form is "true and correct" and not a "false statement or charge".

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Thank you. This report will be investigated.
If you think that you are in danger, please contact a trusted adult right away!

**FOR ADMINISTRATOR USE ONLY**

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Does behavior warrant disciplinary action?     Yes     No

Administrative Findings

No further action required                       further investigation required – Complete investigation process (See Form 4)

Beginning with the 2018-2019 school year, a student enrolled in a Florida public school in **kindergarten through grade 12** who has been subjected to an incident of battery; harassment; hazing; bullying; kidnapping; physical attack; robbery; sexual offenses, harassment, assault, or battery; threat or intimidation; or fighting at school the opportunity to transfer to another public school with capacity or enroll in an approved private school under the Hope Scholarship. (Section §1002.40, Florida Statutes)

**The results of this investigation may be appealed by contacting the school principal.**

*Thank you. This report will be investigated.  
If you think that you are in danger, please contact a trusted adult right away!*