

# Report of Sexual Harassment

Policy Code:

ACA-E

Adoption Date:

Tuesday, March 28th, 2006

Review Date:

Tuesday, November 18th, 2014

## REPORT OF SEXUAL HARASSMENT

This form is affected by the Privacy Act of 1974 and shall be maintained confidential by the School District.

Name: \_\_\_\_\_ Home Telephone Number: \_\_\_\_\_

Street Address: \_\_\_\_\_

Employment Position: \_\_\_\_\_ School: \_\_\_\_\_

Street Address: \_\_\_\_\_

The particulars are (if additional space is needed, attach extra sheets):

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Persons Involved: \_\_\_\_\_

Description of dates, places and nature of sexual harassment: \_\_\_\_\_

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Witnesses (if any): \_\_\_\_\_

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Signature of Complainant