



THE SCHOOL DISTRICT OF PALM BEACH COUNTY
Student Complaint Report

This report MUST be completed when a student files a complaint relating to an incident of alleged student harassment and/or discrimination. The original completed report must be sent to your Regional Office. One copy of the form should be kept on file at the school. If there are any witnesses to the incident, a Witness Statement (PBSD 1616) must be completed for each witness. The completed Witness Statement(s) must be attached to this report before it is sent to your Regional Superintendent, EEO (Equal Employment Opportunity) / Title IX Coordinator, ADA (Americans with Disabilities Act) / Section 504 Specialist, and Age Act (Age Discrimination Act) Coordinator.

Form with fields for Complainant First Name, M.I., Last Name, Gender, Grade, Age, School, School Phone #, Principal, Person Completing Form, Incident Date.

What is the location of the incident?

Three horizontal lines for location information.

Describe the incident

Multiple horizontal lines for describing the incident.

List all witness names

Three horizontal lines for listing witness names.

List evidence of harassment (i.e. letters, photo, etc. - attach evidence if possible)

Three horizontal lines for listing evidence of harassment.

Other Information

Three horizontal lines for other information.

I agree that all of the information on this form is accurate and true to the best of my knowledge.

SIGNATURE OF COMPLAINANT

DATE