


Bridges Charter School 	Board Policy- TITLE IX Harassment, Intimidation, Discrimination & Bullying		
Policy Number: AR 5145.5	Adopted: 10/23/17	Revised: 9/12/22	Replaced:

If you are a student, the parent/guardian of a student, a close adult relative of a student, or a school staff member and wish to report an incident of alleged bullying, harassment, or intimidation, complete this form and return it to the administration in the school office. You may contact the school for additional information or assistance at any time.

**Bridges Charter School TITLE IX
Harassment, Intimidation, Discrimination & Bullying Complaint Form**

Your Name: _____ Date: _____

Date of Alleged Incident(s): _____

Name of Person(s) you have a complaint against: _____

List any witnesses that were present: _____

Where did the incident(s) occur? _____

Please describe the events or conduct that are the basis of your complaint by providing as much factual detail as possible (i.e. specific statements; what, if any, physical contact was involved; any verbal statements; what did you do to avoid the situation, etc.) (Attach additional pages, if needed):

I hereby authorize BRIDGES Charter School to disclose the information I have provided as it finds necessary in pursuing its investigation. I hereby certify that the information I have provided in this complaint is true and correct and complete to the best of my knowledge and belief. I further understand providing false information in this regard could

result in disciplinary action up to and including termination.

Signature of Complainant

Date: _____

Print Name

To be completed by the Charter School:

Received by: _____ Date: _____

Follow up Meeting with Complainant held on: _____