

## REPORT FORM FOR HAZING AND BULLYING

Complainant: \_\_\_\_\_

Home address; work address; home phone; work phone: \_\_\_\_\_

\_\_\_\_\_

Name of person(s) involved in the alleged hazing or bullying behavior:

\_\_\_\_\_

Date of alleged incident(s) \_\_\_\_\_

Number of times that the alleged conduct has occurred \_\_\_\_\_

Location(s) where the alleged conduct has occurred: \_\_\_\_\_

\_\_\_\_\_

Who is the target of the alleged harassment, intimidation, and/or bullying: \_\_\_\_\_

\_\_\_\_\_

Describe the alleged incident as clearly as possible, including such things as what force, if any, was used; any verbal statements (i.e. threats, requests, demands, etc.); what, if any physical contact was involved. Attach additional pages as necessary.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List any witnesses who were present: \_\_\_\_\_

\_\_\_\_\_

This complaint is based upon my honest belief that \_\_\_\_\_  
has hazed or bullied me or another person. I hereby certify that the information I have  
provided in this complaint is true, correct and complete to the best of my knowledge.

\_\_\_\_\_  
(Complainant's signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Received by)

\_\_\_\_\_  
(Date)

Nov., 2010