

A-0381 ACAA-EA

EXHIBIT EXHIBIT

**BULLYING, INTIMADTION,
AND HOSTILE OR OFFENSIVE CONDUCT
STUDENT COMPLAINT FORM**

(To be submitted by a student to the school administrator, or a professional staff member who will forward it to the school administrator, or the administrator’s supervisor.)

Attach Additional Pages As Needed

Student Name: _____ Campus: _____
Address: _____ Tel. No. _____
E-mail Address: _____ Cell No. _____

I wish to complain against (include names, departments, programs, activities, etc.)

Description of incident(s) leading to this complaint (include names, dates, locations, etc.)

Witnesses to the incident or others, if any, who can be contacted for more information:

Please indicate what you like to be done to prevent such an incident in the future:

I certify that this information is correct to the best of my knowledge.

Signature of Student
Making Complaint

Date of this Complaint

Administrator or Professional Staff
Member Receiving this Complaint

Date this Complaint Received