

Katy Independent School District
Student Report of Alleged Bullying (Exhibit B)

Bullying of any kind is prohibited according Katy ISD policy and, in some cases, the acts may be a violation of law. The purpose of this form is to assist you in describing your allegations of bullying and to guide the person investigating your complaint. (If the complainant is unable to complete this report, the investigator or another designated person shall complete the report, read the report back to the complainant to ensure it accurately reflects the account of what was reported, and have the complainant sign the report.)

Name of Student Filing Complaint	School
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Name(s) of the individual(s) against whom you are filing this complaint:

For each person listed above, please describe in detail the following (Please use additional paper if necessary):

a. The specific act(s) complained of:

b. The approximate date and location of each specific act:

c. Your response or reaction to each act:

Name(s) of any individual(s) who might have information about your allegations or who might have witnessed the alleged act(s) of misconduct:

Are there any written documents, notes, or letters relevant to your complaint? Yes No
 If yes, please bring the documents so that photocopies can be made for the investigation file.

My signature indicates that the above information is true and correct to the best of my knowledge.

Signature of Student	Date
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(If applicable, complete the section.) My signature indicates that the above information accurately reflects statements described to me.

Name of Person Completing Form on Complainant's Behalf	Signature of Person Completing Form	Date
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For Administrative Use Only

Date Received	Investigator Assigned
Bullying/Harassment on the basis of (check all that apply)	
<input type="checkbox"/> Sex <input type="checkbox"/> Age <input type="checkbox"/> Race, Color or National Origin <input type="checkbox"/> Disability <input type="checkbox"/> Religion <input type="checkbox"/> Gender <input type="checkbox"/> Other	