

BULLYING PROHIBITION FORM
Jane Goodall Environmental Sciences Academy
Independent School District #4229

General Statement of Policy

Independent School District No. 4229 maintains a firm policy prohibiting acts of bullying, by either an individual student or a group of students, which is expressly prohibited on school premises, on school district property, at school functions or activities, or on school transportation.

Complainant: _____

Address: _____

Phone number: _____

Email: _____

Date of alleged incidents: _____

Name of person you believe bullied or engaged in other prohibited conduct against you or a student:

If the bullying act or other prohibited conduct was toward another person, identify that person:

Describe the incident(s) 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; etc. (Attach additional pages if necessary):

Where and when did the incident(s) occur: _____

List any witness that were present: _____

This complaint is filed based on my honest belief that _____ has bullied or engaged in other prohibited conduct against me or a student. I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

(Complainant Signature)

(Date)

Received by: _____

Please send form to:

Email: kzehowski@jgesa.org (Katie Zehowski)

Fax: 320-963-2064

Mail: 8008 83rd Street NW | Maple Lake | Minnesota | 55358