

# Woodridge Local School District

## REPORT OF HARASSMENT

Student's Name: \_\_\_\_\_ Date of Report: \_\_\_\_\_

Date of Alleged Harassment: \_\_\_\_\_

Location of Alleged Harassment: \_\_\_\_\_

Name of Alleged Harasser: \_\_\_\_\_

Description of the Incident(s): \_\_\_\_\_

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Names of Witness(es), if any: \_\_\_\_\_

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Signature of Person Making the Report

\_\_\_\_\_  
Signature of Person Taking the Report

(over)

