

HARASSMENT REPORT FORM

Statement of Policy Prohibiting Harassment

The Lutheran High Association of Detroit maintains a firm policy prohibiting all forms of discrimination. All persons are to be treated with respect and dignity. Harassment by any person - male or female, which creates an intimidating, hostile or offensive environment, will not be tolerated under any circumstances.

Student (or Adult) _____ School _____

Home address _____

Parent's Name _____

Home telephone _____ Parent work telephone _____

Date of alleged incident (s) _____

Name of the person you believe harassed you _____

List any witnesses that were present _____

Where did the incident (s) occur? _____

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); what, if any, physical contact was involved; what did you do to avoid the situation, etc. (Attach additional pages if necessary.)

This complaint is filed based on my honest belief that _____
has harassed me. 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,

Student (or adult) Signature _____ Date _____

Received By _____ Date _____