

POCATELLO/CHUBBUCK SCHOOL DISTRICT NO. 25

3115 Poleline Road
Pocatello, Idaho 83201
(208) 232-3563

Formal Complaint Form – Sexual Harassment

Student/Employee Name: _____ Date of Event: _____
Age (if student): _____ Date of Filed: _____
Location: _____ Complaint filed with: _____
Grade (if student): _____

Person of Concern : _____

Statement of Complaint:

Action Requested or Relief Sought:

Signature

Date

Resolution of Complaint Following Appeal To: _____

Resolution of Complaint (to be filed within 30 days of receipt of status report):

Investigatory Administrator Signature

Date

Complainant Response:

- I accept the resolution.
- I do not agree with the resolution, but will accept the resolution.
- For Students: I am pursuing this decision further through the Pupil Personnel Director/student discipline process.
- For Staff: I am pursuing this decision further per Collective Bargaining Agreement or through the Human Resource Director.

Complainant Signature

Date

cc: Principal, Elementary/Secondary Director, Human Resource Director (employees)/Pupil Personnel Director (students), Complainant

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Investigative Report

Student/Employee Name: _____ Date Filed: _____
Age (if student): _____ Date of Event: _____
Location: _____ Complaint filed with: _____
Grade (if student): _____

Person of Concern : _____

Statement of Complaint:

_____ _____ _____ _____ _____ _____

Consultation with Outside Agencies:

Who: _____ When: _____ Input/Discussion/Reporting: _____ _____ _____ _____

Preliminary Investigative Assessment of Sexual Harassment:

_____ _____ _____ _____ _____

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Investigative Report

Immediate Action Taken in Regard to Preliminary Investigative Assessment of Sexual Harassment:

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Investigative Information/Assessment and Any Further Disciplinary Action Taken in Regard to Sexual Harassment, including identification of witnesses interviewed and date of interview:

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Conclusion:

<input type="checkbox"/> Sexual Harassment	Rationale: (If Necessary)
<input type="checkbox"/> Not Sexual Harassment	
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Investigatory Administrator Signature

Date

Appeal to Human Resources Director (employees) or Pupil Personnel Services Director (students)

Date Appeal Received by Human Resources Director/Pupil Personnel Services Director: _____

Further Investigative Information/Assessment and Any Further Action Taken in Regard to Sexual Harassment:

Human Resources Director/Pupil Personnel Director Signature

Date

Resolution of Complaint (to be filed within 30 days of receipt of status report):

Complainant Response:

- I accept the resolution.
- I do not agree with the resolution, but will accept the resolution.
- Students: I am pursuing this decision further through the human resource director/student discipline process
- Employee: I am pursuing this decision further per CBA or through the human resource director

Complainant Signature

Date

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cc: Principal, Elementary/Secondary Director, Human Resource Director (employees), Pupil Personnel Director (students), Complainant

***FERPA restricts releasing any personally identifiable information about the person(s) doing the harassing.**

Appeal to Human Resources Director (employees) or Pupil Personnel Services Director (students)

Date Appeal Received by Human Resources Director/Pupil Personnel Services Director: _____

Further Investigative Information/Assessment and Any Further Action Taken in Regard to Sexual Harassment:

Human Resources Director/Pupil Personnel Director Signature

Date