## WOODALL PUBLIC SCHOOL

FB-E1

## SEXUAL HARASSMENT INCIDENT REPORT FORM

Date:	Time: Room/Location:				
Student(s) Initiatin	g Alleged Sexual	Harassment:			
			Grade:	Class:	
			Grade:	Class:	
Student(s) Affected	d:				
			Grade:	Class:	
			Grade:	Class:	
C1 - 1 - 11 1	.1. 4	<b>V. 1.</b> 14 - 4 - 4 - 1 - 1 - 1 - 1		•	
_			entified inappropriate bel	naviors as:	
Name Calling		_	Spitting	aanta	
Stalking			Demeaning Comments		
			Stealing		
			Damaging Propert	Ŋ	
			Shoving/Pushing		
			Hitting/Kicking		
Taunting/Ric			Flashing a Weapon		
Inappropriate			Intimidation/Extor	tion	
Other					
Describe the incide					
Physical evidence:			1 Web sites	_ Video/audio tape	_
Staff signature					
Parent(s) contacted	l: Date		Time		
Administrative res	ponse taken:				
ption Date: 07/27	/2020	D	ision Date(s):		Page 1 of 1