



St. Anastasia Catholic School
401 South 33rd Street, Fort Pierce, FL 34947
Bullying Complaint Report Form

Name of Student: _____ Grade: _____
Today's Date: _____ Name of Accused: _____
Address: _____ Date of Incident: _____
Telephone Number: _____

Specify, in detail, your complaint below. Please describe the incident, participants, background to the incident, and any attempts you've made to resolve the problem. Please include relevant dates, times and places. (Attach a separate sheet if necessary):

Indicate if there are other individuals who could provide more information regarding this complaint including witnesses or participants:

Indicate, in your opinion, how this problem might be resolved. Please be as specific as possible:

I certify that the above information is correct and that the events are accurately depicted to the best of my knowledge.

Name of Complainant

Signature of Complainant

Date