

Discrimination/Bullying/Sexual Misconduct/Harassment - Student Complaint Form

Completed forms should be sent to Dr. Joseph Sciuillo, Director of Student Services, at the Central Administrative Offices: 200 Hillvue Lane, Pittsburgh, PA 15237, or via email: jsciullo@northallegheny.org

The North Allegheny School District believes that bullying, harassment, sexual misconduct, discrimination, or intimidation is serious and will not be tolerated. In order for the district to take action the incident must be reported. The District has a process in place for reporting student harassment by other students and by District employees. Unfortunately, many of these incidents are reported to parent(s)/guardian(s) at home and are never documented with the school district.

Harassment/Discrimination on the basis of age, color, creed, national origin, race, religion, marital status, sex, sexual orientation, gender identity, physical attributes, or disability means conduct of a verbal or physical nature that is designed to unreasonably embarrass, distress, agitate, disturb or trouble students when such conduct has the purpose or effect of unreasonably interfering with a student's performance or creating an intimidating, offensive or hostile learning environment. Bullying is when a stronger, more powerful person hurts or frightens a smaller weaker person, on purpose, again and again. Sexual misconduct is a broad term encompassing any unwelcome behavior of a sexual nature that is committed without consent or by force, intimidation, coercion, or manipulation.

We have created this online form that can be filled out at any time to help students who are targets of bullying, harassment, or intimidation. This form is to report alleged bullying, harassment, or intimidation that occurred on school property; at a school sponsored activity or event off school property; on a school bus; or on the way to and/or from school. ***While this form is geared for the student being targeted, if you are the parent/guardian of a student target, a close adult relative of a student target, or a school staff member and wish to report an incident of alleged bullying, harassment, or intimidation you may also complete this form.*** Please answer these questions as honestly and specifically as you can. The situation will be handled as confidentially as possible by the office of Student Services.

We encourage students and their parent(s)/guardian(s) to complete the form as it provides the District with the relevant information needed to quickly move to address the concern. However, completing this form is only **ONE** option students can use to request help. If you prefer, you can call the North Allegheny TIPSLine at 724-933-TIPS (8477), or you can contact Safe2Say Something at 1-844-SAF2SAY (1-844-723-2729) - www.safe2saypa.org. Both allow you to submit an anonymous tip.

COMPLAINT FORM - PLEASE COMPLETE WITH AS MUCH DETAIL AS POSSIBLE

* Required

Your name * _____

** If you are completing this form out of concern for someone else, what is the name of the *targeted student*? *

** What is your relationship to that student? * _____

Targeted student's grade _____

Targeted student's school * _____

Today's date * _____

Name of the alleged offender, and how you have contact with them (another student, teacher, other staff members, etc.)

Date(s) and Location(s) of incident or incidents

Nature of the incident(s) of bullying, harassment, misconduct, or discrimination

- | | |
|---|---|
| <input type="checkbox"/> Age | <input type="checkbox"/> Physical or Mental Ability |
| <input type="checkbox"/> Ancestry | <input type="checkbox"/> Political Party Preference |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Political Belief |
| <input type="checkbox"/> Familial Status | <input type="checkbox"/> Race or Color |
| <input type="checkbox"/> Gender Identity | <input type="checkbox"/> Religion or Creed |
| <input type="checkbox"/> Marital Status | <input type="checkbox"/> Sex |
| <input type="checkbox"/> National Origin, Ethnic Background | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Physical attribute(s) | <input type="checkbox"/> Socio-economic Status |
| <input type="checkbox"/> Other: | |

Description of the misconduct *

Name of witness(es), if any, that you think we should speak to, and their contact information

Any evidence of harassment, bullying, discrimination, misconduct (i.e. letters, photos, screen shots, texts, etc.) Feel free to attach additional materials, as needed.

Has this been reported to any employee within the North Allegheny School District? _____

If yes, who and when? _____

Has this been reported to anyone else? _____

If yes, who and when? _____

Is this the first time this has happened? _____

If no, how many times has it happened before? _____

Do you feel unsafe right now? _____

Please include any additional information you want to share. You may attach additional materials

I agree that all of the information on this form is accurate and true to the best of my knowledge *

Signature