ARLINGTON Public Schools

To complete this form electronically, it must be opened in *Adobe Reader*!

Reset Form

HARASSMENT, INTIMIDATION, OR BULLYING INITIAL NOTIFICATION

Today's Date:

Name Grade

Name of Accuser: Grade

Date of Incident: Location

Please initial **all** of the following that apply:

Please print and initial. I have been informed of the accusation made against me.

Please print and initial. I have had the opportunity to tell my side of the incident.

Please print and initial. I made a commitment to discontinue/not to engage in the type of behavior that was charged against me.

Please print and initial. I have made a commitment not to retaliate in any way against the accuser.

Please print and initial. I have made a commitment to actively discourage others from retaliation.

Please print and initial. I understand that further incidents will result in progressive disciplinary action.

Additional Notes or Comments:

Signed in the presence of:

Original signature required! Please print and sign.
(This notation will not print.)

Signature

Date