HARTFORD PUBLIC SCHOOLS
Hartford, Connecticut

HARASSMENT FORMAL COMPLAINT FORM

Name and position of complainant: ____________________________________________

Date of complaint: __________________________

Name of alleged harasser: _____________________________________________________

Date and place of incident: ___________________________________________________

Description of misconduct: __________________________________________________

Name of witnesses (if any): ____________________________________________________

Has the incident been reported before? __________________________________________

If yes, when? _________________________________________________________________

To whom was it reported? _____________________________________________________

What was the resolution? ______________________________________________________

Reasons for dissatisfaction: __________________________________________________
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HARASSMENT COMPLAINT - APPEAL FORM

Name and position of complainant: ________________________________

Date of appeal: ________________________________

Date of original complaint: ________________________________

Have there been any prior appeals? ________________________________

If yes, when? ________________________________

To whom? ________________________________

Description of decision being appealed: ________________________________

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__________________________________________________________________

__________________________________________________________________

Why is the decision being appealed? ________________________________

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