

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: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Why is the decision being appealed? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_