

Educational Philosophy

Series 100

Policy Title: Anti-Bullying/Harassment Witness Disclosure Form

Code No. 105B

Name of witness: _____

Position of witness: _____

Date of testimony, interview: _____

Description of incident witnessed: _____

Any other information: _____

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

Signature: _____

Date: _____

Date of Adoption:
January 8, 2014

Legal Reference:

Date Amended:

Related Administrative Rules and Regulations:

Date Reviewed:
September 19, 2018