Lourdes Public Charter School

Code: GBN/JBA-AR(3)

Revised/Reviewed: 4/28/25

Sexual Harassment Complaint and Witness Forms

Name of complainant:

Position of complainant:

Date of complaint:

Name of alleged harasser:

Date and place of incident or incidents:

Description of misconduct:

Name of witnesses (if any):

Evidence of sexual harassment, i.e., letters, photos, etc. (attach evidence if possible):

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:

**Witness Disclosure Form**

Name of Witness:

Position of Witness:

Date of Testimony/Interview:

Description of Instance Witnessed:

Any Other Information:

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

Signature: Date: