

**\* \* \* ATTENTION \* \* \***

**DISTRICT 719 POLICY AGAINST HAZING**

1. Everyone at District 719 has a right to feel respected and safe. Consequently, we want you to know about our policy to prevent hazing.
2. A harasser may be a student or an adult. Harassment may include the following:
  - A. Name calling, jokes or rumors
  - B. Pulling on clothing
  - C. Graffiti
  - D. Notes or cartoons
  - E. Unwelcome touching of a person or clothing
  - F. Offensive or graphic posters or book covers
  - G. Any words or actions that make you feel uncomfortable, embarrass you, hurt your feelings or make you feel bad.
3. If any words or action make you feel uncomfortable or fearful, you need to tell a teacher, counselor, the principal or a Human Rights Officer, Matthew Mons (employee issues) or Jeff Holmberg (student issues) at the DSC.
4. You may also make a written report. It should be given to a teacher, counselor, the principal or a Human Rights Officer.
5. Your right to privacy will be respected as much as possible.
6. We take seriously all reports of harassment or violence and will take all appropriate actions based on your report.
7. The school district will also take action if anyone tries to intimidate you or take action to harm you because you have reported.
8. This is a summary of the school district policy against harassment and violence. Complete policies are available in each school office, upon request.

**HARASSMENT AND VIOLENCE ARE AGAINST THE LAW.**

**DISCRIMINATION IS AGAINST THE LAW.**

<b>CONTACT:</b>	<b>Jeff Holmberg</b>	<b>Matt Mons</b>
	<b>Human Rights Officer (student issues)</b>	<b>Human Rights Officer (employee issues)</b>
	<b>4540 Tower Street SE</b>	<b>4540 Tower Street SE</b>
	<b>Prior Lake, MN 55372</b>	<b>Prior Lake, MN 55372</b>
	<b>Phone: 952-226-0000</b>	<b>Phone: 952-226-0000</b>

PRIOR LAKE - SAVAGE AREA SCHOOLS  
INDEPENDENT SCHOOL DISTRICT 719

**HARASSMENT AND VIOLENCE REPORT FORM**

General Statement of Policy Prohibiting Harassment, or and Violence

Independent School District 719 maintains a firm policy prohibiting all forms of discrimination. Harassment or violence, against students or employees or groups of students or employees on the basis of race, color, creed, religion, national origin, sex, age, marital status, familial status with regard to public assistance, sexual orientation, or disability is strictly prohibited. All persons are to be treated with respect and dignity. Harassment or violence on the basis of race, color, creed, religion, national origin, sex, age, marital status, familial status, status with regard to public assistance, sexual orientation, or disability by any pupil, teacher, administrator or other school personnel, which create an intimidating, hostile or offensive environment will not be tolerated under any circumstances.

Complainant: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Work Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date of Alleged Incident(s): \_\_\_\_\_

**Basis of Alleged Harassment/Violence** - circle as appropriate:

race / color / creed / religion / national origin / sex / age / marital status / familial status / status with regard to public assistance / sexual orientation / disability

Name of person you believe harassed or was violent toward you or another person or group: \_\_\_\_\_  
\_\_\_\_\_

If the alleged harassment or violence was toward another person or group, identify that person or group: \_\_\_\_\_  
\_\_\_\_\_

Describe the incident(s) as clearly as possible, including such things as: what force, if any, was used; any verbal statements (i.e. threats, requests, demands, etc.); what, if any, physical contact was involved; etc. (attach additional pages if necessary): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When and where did the incident(s) occur? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any witnesses who were present: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This complaint is filed based on my honest belief that \_\_\_\_\_ has harassed or has been violent to me or to another person or group. I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Complainant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received By

\_\_\_\_\_  
Date