ALA Bullying, Hazing, Abusive Conduct Response

American Leadership Academy maintains a firm policy prohibiting all forms of bullying, hazing and abusive conduct.

Respondent Information:

Name:_____ Phone :_____

Home Address: _____Email: _____

Date/Time of Incident: _____

Names of Respondents: _____

Location of Incident:_____

Names of witnesses: _____

Provide a detail response to the complaint against you. This includes admitting, or denying each allegation made and telling your version of the facts. Attach additional pages if necessary. _____

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I hereby represent that the information provided herein is true, correct, and complete to the best of my knowledge.

_____ _____

Signature Date

If the Respondent is unable or unwilling to complete or sign this form, provide the following information and sign below.

Name of person completing form:_____

Reason Respondent did not complete and sign form:_____

_____

_____

_____ _____

Signature of person completing form Date

Confidentiality and Retaliation: In order to protect the privacy and interest of individuals and to ensure the integrity of the investigation, this complaint and investigation are confidential. You are hereby directed to refrain from speaking of or disseminating relevant facts or information concerning this matter to others. You are also directed to refrain from retaliation against the person who make the complaint. Disciplinary action may be imposed for violation of this directive.