

TGU Speak Up

Instructions: Please complete the form as accurately as possible. You may choose to include your name at the bottom of the form, or you may submit it anonymously. Please note that the District's ability to investigate an anonymous complaint may be limited and the District prohibits retaliation against anyone who files a Speak Up form.

Describe what happened/what is happening: _____

When did it happen?

- Before school
- During School
- After School
- Other _____

Where did it happen?

- Classroom
- Gym
- Playground
- School Bus
- Online
- At a School Event _____
- Other _____

Who is doing this? (If you do not know the name(s), please describe them): _____

Who was the victim? (If you do not know the name(s), please describe them): _____

Have you told anyone else about this problem?

- Parent/Guardian
- Babysitter
- Brother/Sister
- Other Family Member
- Teacher/Principal/School Staff
- Community Member
- Friend
- Other _____

Has this ever happened before?

- Yes How many times? _____
- No

Did anyone witness what happen?

- Yes Who? _____
- No

Your Contact Information:

Your name: _____

- Student: Grade_____ Age_____
- Parent/Guardian
- Community Member
- Staff Member

What is the best way to contact you?

- Phone: _____
- Email: _____
- Other: _____

Please give this form to a Principal, Teacher or other school staff, turn it into the main office or drop it in the Speak Up Box in the Library.