



Harassment or Discrimination Reporting Form

Bay District Schools policy prohibits discrimination on the basis of sex in any educational program or activity. If you believe you have been subjected to harassment or discrimination, please complete this form or submit a letter with the same information.

Reporter Name: _____

Email address: _____

Phone number: _____

Incident Date/Time, if known: _____

Location, if known: _____

Primary Concern (Required), please explain as clearly and neatly as possible, what happened and when, why you believe it happened, and the harassment/discrimination that occurred. Please indicate who was involved and any other persons. Please use additional sheets if necessary:

Persons Involved, please list any persons whom we may contact for additional information to support or clarify your report:

| Name | Address | Telephone |
|-------|---------|-----------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

(Signature)

(Date)

Please submit to Bay District Schools by mail, email or phone to Title IX Coordinator - Maria Lang: 1311 Balboa Avenue, Panama City, Florida 32401, (850) 767-4322, langmh@bay.k12.fl.us or file the complaint with any school level administrator.