



**HARASSMENT
POLICY VERIFICATION
FORM**

I, _____,

please print your name

- (check one) an employee of
- a volunteer at
- a parent/guardian of a student
- a student (grades 6-12)

have received copies of the Diocesan policy on harassment.

I understand that it is necessary that any complaint of harassment must be filed with an official of the school or the superintendent's office. I have had an opportunity to read the policy and am confident I understand the content and purpose.

name of school

your signature

Date: _____

Complaints of harassment or retaliation may be filed with the principal, assistant principal, or pastor at the elementary level; and with the principal, assistant principal or superintendent at the secondary level.

**Department of Education
Catholic Diocese of Columbus**