

**LAFAYETTE PARISH SCHOOL BOARD
SEXUAL HARASSMENT REPORT**

TO: Appropriate School Director/Supervisor

Date: _____ Location: _____

Reported By: _____ Position: _____

Investigated By: _____ Position: _____
Administrator/Supervisor

Employee (s)/Student(s) involved:

1. _____ 2. _____
3. _____ 4. _____

Date first reported: _____ Date of incident: _____

Description of alleged harassment: _____

Investigative report: _____

Action taken: _____

Follow up of allegations after 30 days: _____

Follow up of allegations after 90 days: _____

Signature(s) of employee(s) involved _____

Signature(s) of student(s) involved _____

Signature of administrator/Supervisor _____