## Palisades Park School District

## **Confidential**

## Referral of Affirmative Action Incident/Complaint to A.A.O.

	Building/School:	
		A.A.O:
Person referring	s not to interview co	omplainant or investigate
Date/Time informa	al complaint received:	
Method of report: _ (In person / writte	n / fax / email / phon	e call)
Who made report: (Name of student /	employee / parent /	volunteer / visitor)
Date of incident(s):	·	
Alleged Victims(s): (Identify name, job provide age and se	•	nteer / visitor. If student is a victim
Accused:		
	title / student / volument	nteer / visitor. If student is a victim
Allegation (provide	e short description):	
Prepared by:		Job Title:
-	Signature:	