

_____ (your street address)
_____, _____ (city, state zip code)
_____ (date)

_____ (name of Principal)
_____ (name of school)
_____ (school address)

RE: _____ (first and last name of child)

Dear _____, (name of Principal)

My child, _____, (first name of child) is in the _____ (grade level) at _____ (name of school). At school _____ (s/he) has been bullied and harassed by _____ (name of harasser(s)). This has occurred on _____ (date or approximate period of time) when _____ (describe as many details of the incident(s) as can be recalled). When this happened _____ (name of witness(es)) heard or saw it and _____ (their response(s)). We became aware of this incident when _____ (describe how you were notified).

_____ (first name of child) was hurt by this bullying and harassment. _____ (She/He) had _____ (describe physical injuries, emotional suffering and any medical or psychological treatment required). _____ (Our/My) child has the right to be in a safe environment at school so _____ (s/he) can learn.

Please send _____ (me/us) a copy of the District policies on bullying and harassment, investigate this problem and correct it as soon as possible. Please let _____ (me/us) know, in writing, of the actions you have taken to rectify the situation and to ensure it does not happen again. I expect a response within 5 business days.

Thank you for your prompt attention to this serious problem.

Sincerely,

(Sign in this area)

_____ (your name)

CC: _____ (name of Superintendent of schools), Superintendent

(Sign and keep a copy for your records)