Alpha Public School
Interview Information Statement Form

Name: _____ Please Check: ____Target ____Accused _____Witness

Written Report #: _____Date of Written Report: _____School/Work Location _____

Description of Incident(s)

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(Attach additional page(s) of information, if needed)

I certify:

___ I wrote the description of the incident(s) above and this information is accurate and true to the best of my knowledge.

___ I provided the information explained in the description of the incident(s) above to the Anti-Bullying Specialist and this information is accurate and true to the best of my knowledge.

_____	_____	_____
Printed Name	Signature	Date
_____	_____	_____
Anti-Bullying Specialist	Signature	Date

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