Bullying, Harassment, or Intimidation Reporting Form

Bullying, harassment, or intimidation is defined as any intentional written, verbal, graphic, or physical act that a student or group of students exhibit toward another particular student more than once and the behavior both: a) Causes mental or physical harm to the other student; and b) Is sufficiently severe, persistent or pervasive that it creates an intimidating, threatening or abusive educational environment for the other student. Bullying, harassment, and intimidation also includes cyberbullying committed through electronic acts (the use of a cellular telephone, computer, pager, personal communication device, or other electronic communication device).

Name: _________________________________________ Date of Incident: _______________

School: ________________________________________ Time of Incident: _______________

Grade: _____ Contact Information: __________________________________________

Reported by (if other than victim above): ____________________________________________

Contact Information (if other than victim above): ______________________________________

Name(s) of Alleged Aggressor(s): ___________________________________________________

Description of Incident: __________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Location where Incident Occurred:

□ Bus  □ Restroom  □ Classroom  □ Cafeteria  □ Playground

□ At a School Event  □ Other Physical Location: _________________________________

□ Electronic Act/Online: □ Cellphone  □ Social Media  □ Other ___________________
**Type of Incident:**

- □ Name Calling  □ Verbal Threat  □ Physical Assault  □ Property Damage/Theft
- □ Cyberbullying  □ Intimidation  □ Social Exclusion  □ Unwanted Physical Contact
- □ Inappropriate Comments/Language  □ Other: _________________________________

**Type of Bias (if applicable):**

- □ Race  □ Disability  □ Sex/Gender  □ Religion  □ National Origin
- □ Sexual Orientation  □ Other: _________________________________

List names of any witnesses: ______________________________________________________

Have you told anyone about the Bullying, Harassment, or Intimidation?  □ Yes  □ No

If yes, select all that apply:

- □ Parent  □ Sibling  □ Teacher  □ Administrator  □ Coach
- □ Guidance Counselor  □ Other: _________________________________

Dates of Prior Incidents: _________________________________________________________

Describe Prior Incidents: _________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Have you previously filed a Report of bullying, harassment, or intimidation?  □ Yes  □ No

If yes, did it involve the same alleged aggressor(s):  □ Yes  □ No

Signature: ___________________________  Date: __________________

Employee Name: ________________________  Date: __________________