Harassment-Intimidation-Bullying Incident Reporting Form

Today's date: ________________

Name of Reporting person (optional): ______________________________________________________

Name of Targeted Student (student being bullied/harassed/intimidated): __________________________

Your email address (optional): ________________________ Your phone number (optional): ___________

Name of school adult you’ve already contacted (if any): ____________________________________________

Name(s) of bullies (if known): ______________________________________________________________

On what dates did the incident(s) happen (if known): ___________________________________________

Where did the incident happen? Circle all that apply.

- Classroom
- Hallway
- Restroom
- Playground
- Locker room
- Lunchroom
- Sport field
- Parking lot
- School bus
- Internet
- Cell phone
- Other (Please describe): __________________________________________________________________

Please check the box that best describes what the bully did. Please choose all that apply.

☐ Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
☐ Getting another person to hit or harm the student
☐ Teasing, name-calling, making critical remarks or threatening in person, by phone, by e-mail, etc.
☐ Putting the student down and making the student a target of jokes
☐ Making rude and/or threatening gestures
☐ Excluding or rejecting the student
☐ Making the student fearful, demanding money or exploiting
☐ Spreading harmful rumors or gossip
☐ Cyber bullying (bullying by calling, texting, emailing, web posting, etc.)
☐ Other

If you select other, please describe __________________________________________________________________

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Board of Directors: Nasario Soliz Jr., Dan Miller, Craig Janett, Ian Bergeson, Alison Huntzinger
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Why do you think the harassment, intimidation or bullying occurred?

___________________________________________________________________________________________

Were there any witnesses? Yes □  No □  If yes, please provide their names:

___________________________________________________________________________________________

___________________________________________________________________________________________

Did a physical injury result from this incident? If yes, please describe.

___________________________________________________________________________________________

Was the targeted student absent from school as a result of the incident? □ Yes □ No  If yes, please describe:

___________________________________________________________________________________________

Is there any additional information?

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

___________________________________________________________________________________________

Thank you for reporting!

For Office Use

Received by: __________________________________________________________

Date received: ______________________________

Action taken: __________________________________________________________

Parent/guardian contacted: ______________________________________________

Circle one:  Resolved          Unresolved

Referred to: __________________________________________________________

Last updated: 3/16/2023 2:40 PM