

BULLYING, HARASSMENT OR INTIMIDATION REPORTING FORM

This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g.

Directions: Bullying, harassment and intimidation are serious and will not be tolerated. This is a form to report alleged bullying, harassment or intimidation that occurred in the current school year on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to or from school. **If you are a student victim, the parent or guardian of a student victim, a close adult relative of a student victim or a school staff member, and you wish to report an incident of alleged bullying, harassment or intimidation, complete this form and return it to the principal at the student victim's school. Contact the school for additional information or assistance at any time.**

Bullying, harassment or intimidation means intentional conduct — including verbal, physical or written conduct, or an intentional electronic communication — that (I) creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities or performance, or with a student's physical or psychological well-being and is (i) motivated by an actual or a perceived personal characteristic including race, national origin, marital status, sex, sexual orientation, gender identity, religion, ancestry, physical attribute, socioeconomic status, familial status or physical or mental ability or disability; or (ii) threatening or seriously intimidating; and (II) (i) occurs on school property, at a school activity or event, or on a school bus; or (ii) substantially disrupts the orderly operation of a school. Electronic communication means a communication transmitted by means of an electronic device, including a telephone, cellular phone, computer or pager.

PERSON REPORTING INCIDENT	Place an X in the appropriate box:
Name: _____	<input type="checkbox"/> Student
Telephone: _____	<input type="checkbox"/> Student (<i>Witness/Bystander</i>)
E-mail: _____	<input type="checkbox"/> Parent/Guardian
	<input type="checkbox"/> Close Adult Relative
	<input type="checkbox"/> School Staff

1. Name of student victim: _____ Age: _____
(please print)

2. Name(s) of alleged offender(s) if known <i>(please print)</i>	Age	School <i>(if known)</i>	Is he/she a student?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident(s) happen?

____ / ____ / ____ ____ / ____ / ____ ____ / ____ / ____ ____ / ____ / ____
Month Day Year Month Day Year Month Day Year Month Day Year

4. Place an X next to the statement(s) that best describes what happened (*choose all that apply*):

- Any bullying, harassment or intimidation that involves physical aggression
- Getting another person to hit or harm the student
- Teasing, name-calling, making critical remarks or threatening, in person or by other means
- Demeaning and making the victim of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting
- Spreading harmful rumors or gossip
- Electronic communication (*specify*) _____
- Other (*specify*) _____

5. Where did the incident happen? (*choose all that apply*)

- On school property
- At a school-sponsored activity or event off school property
- On a school bus
- On the way to/from school (*will be collected unless specifically excluded by local board policy*)

6. What did the alleged offender(s) say or do? (*attach a separate sheet if necessary*)

7. Why did the bullying, harassment or intimidation occur? (*attach a separate sheet if necessary*)

8. Did a physical injury result from this incident? Place an X next to one of the following:

- No
- Yes, but it did not require medical attention
- Yes, and it did require medical attention

9. If there was a physical injury, do you think there will be permanent effects?

- Yes
- No

10. Was the student victim absent from school as a result of the incident?

- Yes
- No

If yes, how many days was the student victim absent from school as a result of the incident? _____

11. Did a psychological injury result from this incident? Place an X next to one of the following:

- No
- Yes, but psychological services have not been sought
- Yes, and psychological services have been sought

12. Is there any additional information you would like to provide? (*attach a separate sheet if necessary*)

Signature: _____ Date: _____