# Bullying Incident Report Form

If you have been the target of bullying, the parent/guardian of an apparent victim or allege that you have witnessed the bullying of any student, complete this form and submit it to the building principal.

**Bullying** is defined as intimidation, unwanted aggressive behavior, or harassment that is repetitive or is substantially likely to be repeated and causes a reasonable student to fear for his or her physical safety or property; that substantially interferes with the educational performance, opportunities or benefits of any student without exception; or that substantially disrupts the orderly operation of the school. Bullying includes, but not limited to: physical actions, including violence, gestures, theft, or property damage; oral, written, or electronic communication, including name calling, put-downs, extortion, or threats; or threats of reprisal or retaliation for reporting such acts.

**Cyberbullying** is a form of bullying committed by transmission of a communication including, but not limited to, a message, text, sound or image by means of an electronic device including, but not limited to, a telephone, wireless telephone or other wireless communication device, computer or pager.

Reports of bullying will be investigated and disciplinary action will be taken as warranted.

| Name: _______________________________ | Date __________________ Time __________________ |
| Phone Number(s) ____________________________________________ |
| • You are a: Student Parent Employee Volunteer Other |
| Date(s) of alleged bullying: ____________________________________________________________ |
| Name of student(s) subjected to alleged bullying or harassment: ____________________________ |
| Person(s) alleged to have committed the bullying or harassment: ___________________________ |

Describe the incident(s). Please be as specific as possible. Please indicate whether you witnessed the incident. Attach additional sheets or use back side of the form if necessary.

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Names of witnesses: ____________________________________________________________

Have you reported this to anyone else: ___Yes ___ No If yes, to whom was it reported? ________________________________

*Signature of Complainant ____________________________________________________________

*Students have the right to complete this form anonymously. However, it will be easier for the District to investigate this matter if as much information as possible is provided. Submission of a good faith complaint or report of bullying or harassment will not affect the complainant or reporter’s future employment, grades, learning, or working environment. A complainant that falsely accuses someone will be subject to disciplinary action.

For District Administration Use Only:

Report received by: __________________________ Date received __________ Time received __________

Revised: October 2017