Bullying/Cyberbullying Reporting Form (To Be Given to Principal)

Today's date/ School				
Person Reporting Incident: Name				
Telephone: Email:				
Place an 🔀 in the appropriate box:				
☐ Student ☐ Student (witness/bystander) ☐ Parent/Guardian ☐ Close Adult relative ☐ School Employee, volunteer, contractor				
1. Name of student victim Age				
(Please Print)				
2. Name(s) of alleged perpetrator(s) (if known): (Please print)	Age	School (if known)	Is he/she a student?	
			□Yes □No	
			□Yes □ No	
			□Yes □No	
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3. Name(s) of witnesses or other involved parties: (Please print)	Age	School (if known)	Is he/she a student?	
F	8*		☐Yes ☐No	
			□Yes □No	
			□Yes □No	
4. On what date(s) did the incident happen?////				
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 Off school property or outside a school-sponsored event or activity				
6. Place an \boxtimes next to the statement(s) that best describes what happened (choose all that apply):				
Bullying or cyberbullying that involves physical harm				
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 the subject of jokes	
Excluding the student and encouraging others to do so	
Spreading harmful rumors or gossip	☐ Writing/Graffiti
☐ Stalking	☐ Damaging/taking property
☐ Electronic communications (specify and attach copies)	☐ Making rude and/or threatening gestures
Other (specify)	☐ Intimidating, extorting, or exploiting
	llowing personal characteristics, behaviors or beliefs or the student rsonal characteristics, behaviors or beliefs? (choose all that apply)
Race	
Sex/Sexual Orientation	
Religion	
☐ National Origin	
Physical Characteristics	
Behaviors	
Other (specify)	
8. Describe in detail what the alleged perpetrator(s) said an any witnesses. (Attach a separate sheet if necessary)	nd did including the location(s) of the incident(s) and the names of
9. Why, if you know, did the incident(s) occur? (Attach a separate sheet if necessary)	
10. Did a physical injury result from this incident? Place an	n next to one of the following:
☐No ☐Yes, but it did not require medical atte	ntion Yes, and it required medical attention
(If yes, describe the injury)	
11. If there was a physical injury, do you think there will be	e permanent effects?

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12. Was the student victim absent from school as a result of the incident? \square Yes	s
13. Did emotional distress result from this incident? Place an \boxtimes next to one of the	he following:
\square No Yes, but no services or treatment has been sought \square Yes, and	services and treatment have been sought
If yes, describe the injury:	
14. Is there any additional information you would like to provide? (Attach a separate sheet if necessary)	
Signature Date	
Digitature Date	