

Bullying and Harassment Student Form

Directions: If you feel that you have been bullied, please fill out the form below. If you need more space, attach additional documentation as needed. You may turn this form in to a school administrator or a counselor, or you may submit to the email address below. You will be contacted within a few days.

Name: _____ Grade: _____ Date: _____

School: _____

Contact Information (Phone number and/or e-mail) _____

Please provide the day and time of the bullying incident: ____/____/____

Describe what happened and who was involved in the reported incident (please include names of possible witnesses to action or report):

What did you do?

Were threats communicated in any way? _____ yes _____ no
Please list how the threats were communicated (text, verbally, written, use of other technological method):

Prior to completion of this form, was this action reported to or observed by another adult? _____
yes _____ no

If yes, who and when was the original report made?

Date report received by administrator: ____/____/____

Date formal investigation initiated: ____/____/____

Signature of administrator/counselor: _____