

## **Reporting Form for Student Being Bullied/Harassed**

Your Name (Optional):

Have you reported this incident to the school:

I am:

Name of School:

If other:

Name of individual reported to:

Name of person allegedly being bullied/harassed:

Name of alleged bully:

The alleged bully is a:

The alleged bully attends/works at:

If other:

If other:

Date of incident:

Incident occurred during:

Did you witness the incident?

List any other students, staff, or other individuals who witnessed the incident: (Include contact information if known such as school attending or phone number)

Type of incident:

Physical (Hitting, kicking, or other physical aggression)

Verbal (Teasing, name calling, put downs, or other behavior that would hurt others' feelings or make them feel bad)

Emotional/Exclusion (Starting rumors, telling others not to be friends with someone, or other actions that would cause someone to be without friends)

Cyber (Using an electronic medium to conduct a verbal and/or emotional incident)

Description of the incident: (Please be as specific as possible with the location, time, what took place, etc.)

Click on one of the buttons below to print, submit, or print and submit the form. NOTICE: After you make your selection the form will reset back to a blank form. However, you can save the form before clicking on a button.