PAULSBORO PUBLIC SCHOOLS HARASSMENT, INTIMIDATION, AND BULLYING (HIB) STUDENT REPORTING FORM

Billingsport Early Childhood Center 441 Nassau Avenue Paulsboro, NJ 08066 856-423-2226 Loudenslager Elementary School 100 Baird Avenue Paulsboro, NJ 08066 856-423-2228 Paulsboro High School 670 N. Delaware Street Paulsboro, NJ 08066 856-423-2222

Name of Student Reporting:	Grade and Date:
Date of Incident: Location a	and Time of Incident:
Witnesses (Bystanders):	
1	4
2	5
3	6
Check all spaces below that apply to thi	is incident:
Name callingSpitting	Cyber-Bullying
Demeaning commentsInappr	opriate gesturingStealing
Staring/LeeringDamaging pr	ropertyWriting/Graffiti
Shoving/PushingThreatening	gHitting/Kicking
Taunting/RidiculingInapprop	priate touching Dangerous instrument
Exclusion	
Other	
Describe the incident (use the back of the	his page if necessary):
Physical evidence (attach if available).	
Graffiti NotesE-mailV	Veb sites Txt message
Video/Audio tape Other	None
Student Signature:	Date:
Received by:	Date: