BULLYING REPORTING AND INCIDENT FORM

As used in the School Bullying Prevention Act, “harassment, intimidation, and bullying” means any gesture, written or verbal expression, electronic communication or physical act that a reasonable person should know will harm another student, damage another student’s property, place another student in reasonable fear of harm to the student’s person or damage to the student’s property, or insult or demean any student or group of students in such a way as to disrupt or interfere with the school’s educational mission or the education of any student. Harassment, intimidation, and bullying are repeated, intentional behaviors which include, gestures or written, verbal, or physical acts, or electronic communications. Such behavior is specifically prohibited. Policy FCND

Today’s Date: _______________ School: □ Primary □ Northwood □ Piedmont Elementary □ Stone Ridge □ Intermediate □ Middle School □ High School

Person Reporting Incident
Name: _____________________________________ Phone: ________________________________
□ Student □ Student (bystander/witness) □ Parent/Guardian □ School Staff □ Other ________________________________

Date(s) incident(s) occurred: ________________________________ Time: ___________________

Name of student victim(s): ____________________________________________________ Grade: ______

Name(s) of alleged offender(s), if known: Student? Grade School
1 ________________________________ □ yes □ no ______  ____________
2 ________________________________ □ yes □ no ______  ____________
3 ________________________________ □ yes □ no ______  ____________

Type of Bullying (X all that apply):
□ Name Calling/Offensive Remarks □ Exclusion □ Hit, Kicked, Punched, etc. □ False Statements
□ Racial Comments □ Sexual Comments □ Took/Damaged Possessions □ Electronic Communications
□ Other/ Explanation: _____________________________________________________________________

Where did the bullying take place? (X all that apply):
□ Athletic Field □ Hallway □ Classroom □ Restroom □ Lunchroom □ To/From School
□ Bus Stop □ Gym □ Locker Room □ Lockers □ School Grounds □ Other __________________________

People the victim has spoken to about the bullying incident: (X all that apply):
□ Teacher □ Other Adult at School □ Parent/Guardian □ Sibling □ Friend □ Other _________________

What did the alleged offender(s) say or do? _____________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Did physical injury result from this incident?
☐ No  ☐ Yes, but it did not require medical attention  ☐ Yes, and it required medical attention
Medical Attention Required: _______________________________________________________________

Was the student victim absent from school as a result of this incident?  ☐ No  ☐ Yes, _____ number of days

Is there any additional information you would like to provide?
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Please note: The school district is not authorized to disclose to a victim, private educational or personnel data regarding an alleged perpetrator who is a student or employee of the school district. School officials will notify the parent(s) or guardian(s) of students involved in a bullying incident and the remedial action taken, to the extent permitted by law, based on a confirmed report.

Signature: ___________________________________________  Date: ______________________

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INVESTIGATION REPORT

Investigated by: ________________________________  Title: _____________________  Date: _______

Investigation finds (check appropriate response):
    ☐ Found grounds to substantiate the allegations
    ☐ Did not find grounds to substantiate the allegations
    ☐ Did not find enough information to make a judgement on the allegations

Summary of investigation, findings and disciplinary action:
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Victim Parent/Guardian Contacted:
☐ No  ☐ Yes  Date: _________________  Name: ___________________________________________

Alleged Offender(s) Parent/Guardian Contacted:
1  ☐ No  ☐ Yes  Date: _________________  Name: _________________________________________
2  ☐ No  ☐ Yes  Date: _________________  Name: _________________________________________
3  ☐ No  ☐ Yes  Date: _________________  Name: _________________________________________

Signature of Investigator: ___________________________________________  Date: _______________
Signature of Principal: _____________________________________________ Date: __________________