

## Bullying/Harassment Report Form

This report is to be completed by the individual making or receiving a report of alleged bullying or harassment. The administrator may complete this form when receiving a report of alleged bullying or harassment from a student. If the reporting individual is unable or unwilling to complete the form, it should be filled out by the administrator receiving the report.



Campus: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Person Completing Report: \_\_\_\_\_ Title: \_\_\_\_\_

Person Reporting Bullying/Harassing Conduct: \_\_\_\_\_

Alleged Target Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ ID#: \_\_\_\_\_

Alleged Perpetrator's Name(s): \_\_\_\_\_ Grade: \_\_\_\_\_ ID#: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_ ID#: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_ ID#: \_\_\_\_\_

Name(s) of Witness(es) to Alleged Conduct: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date(s) of Incident(s): \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

Description of Incident(s) or Event(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



Was Incident ever reported to anyone else?  Yes  No

If yes, to whom, when, and what was done: \_\_\_\_\_

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Other information, including prior incidents or threats:

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Receiving School Administrator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Additional comments or notes from receiving school official: \_\_\_\_\_

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