

Bedminster Township Public School District

Harassment, Intimidation, Bullying Reporting Form

HARASSMENT OR INTIMIDATION (BULLYING) REPORTING FORM

Directions: Harassment and intimidation (bullying) are serious and will not be tolerated. This is a form to report alleged harassment and intimidation (bullying) that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school, in the current school year. If you are a student victim, the parent/guardian of a student victim, or a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged harassment or intimidation (bullying), complete this form and return it to the Principal at the school. Contact the school for additional information or assistance at any time.

Every reported act of H.I.B. will be investigated, and parents/guardians will be informed.

Today's date: _____ / _____ / _____
Month Day Year

School: _____

School System: _____

Leave blank if reporting anonymously.

PERSON REPORTING INCIDENT	Name: _____
Telephone: _____	E-mail: _____
Place an X in the appropriate box: <input type="checkbox"/> Student <input type="checkbox"/> Parent/guardian <input type="checkbox"/> Close adult relative <input type="checkbox"/> School Staff	

1. Name of student victim: _____ Age: _____
(Please print)

2. Name(s) of alleged offender(s) (If known): <small>(Please print)</small>	Age	School <small>(if known)</small>	Is he/she a student?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident happen?

_____ / _____ / _____
 _____ / _____ / _____
 _____ / _____ / _____
Month Day Year
 Month Day Year
 Month Day Year

4. Where did the incident happen (choose all that apply)?

- | | |
|---|--|
| <input type="checkbox"/> On school property | <input type="checkbox"/> At a school-sponsored activity or event off school property |
| <input type="checkbox"/> On a school bus | <input type="checkbox"/> On the way to/from school* |

5. Place an X next to the statement(s) that best describes what happened (choose all that apply):

- Hitting, kicking, shoving, spitting, hair pulling, or throwing something
- Getting another person to hit or harm the student
- Teasing, name-calling, making critical remarks, or threatening, in person or by other means
- Demeaning and making the victim of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting
- Spreading harmful rumors or gossip
- Electronic communication

Other (specify) _____

6. What did the alleged offender(s) say or do? _____

(Attach a separate sheet if necessary)

7. Why did the harassment or intimidation (bullying) occur? _____

(Attach a separate sheet if necessary)

8. Did a physical injury result from this incident? Place an X next to one of the following:

No Yes, but it did not require medical attention Yes, and it required medical attention

9. If there was a physical injury, do you think there will be permanent effects? Yes No

10. Was the student victim absent from school as a result of the incident? Yes No

If yes, how many days was the student victim absent from school as a result of the incident? _____

11. Did a psychological injury result from this incident? Place an X next to one of the following:

No Yes, but psychological services have not been sought Yes, and psychological services have been sought

12. Is there any additional information you would like to provide? _____

(Attach a separate sheet if necessary)

Signature: _____ Date: _____