

**DISCRIMINATION/HIB INCIDENT REPORTING FORM**

Cheney School District No. 360 is committed to a safe and civil educational environment for all students, employees, parent/guardians, volunteers, and patrons, and maintains a firm policy prohibiting all forms of discrimination, harassment, intimidation, and/or bullying (D/HIB). All persons are to be treated with respect and dignity. This form is to be used in accordance with Policy & Procedure 3207 for acts of D/HIB involving students.

Reporting person (optional): \_\_\_\_\_ Phone number (optional): \_\_\_\_\_

Targeted student: \_\_\_\_\_ School \_\_\_\_\_

Your email address (optional): \_\_\_\_\_ Today's date: \_\_\_\_\_

Name of school adult you've already contacted (if any): \_\_\_\_\_

Name(s) of bullies (if known): \_\_\_\_\_

On what dates did the incident(s) happen (if known): \_\_\_\_\_

Where did the incident happen? Check all that apply.

- Classroom    Hallway    Restroom    Playground    Locker room    Lunch room    Sport field
- Parking lot    School bus    Internet    Cell phone    During a school activity    Off school property
- On the way to/from school

Other (please describe): \_\_\_\_\_

**Please check the box that best describes what the bully did. Please check all that apply.**

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
- Getting another person to hit or harm the student
- Teasing, name calling, making critical remarks or threatening in person, by phone, by email, etc.
- Putting the student down and making the student a target of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Making the student fearful, demanding money or exploiting
- Spreading harmful rumors or gossip
- Cyber bullying (bullying by calling, texting, emailing, web posting, etc.)
- Other

If you select other, please describe: \_\_\_\_\_

**Describe the incident(s) as clearly as possible**, including such things as: (a) where it occurred; (b) what force, if any, was used; (c) verbal statements that were made (i.e. threats, requests, demands, etc.); (d) and what, if any, physical contact was involved. Please attach additional pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Why do you think the harassment, intimidation or bullying occurred?** \_\_\_\_\_

\_\_\_\_\_

**Have you taken steps to try to resolve the situation?** Please describe.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Were there witnesses? Yes  No  If yes, please provide their names:

\_\_\_\_\_  
\_\_\_\_\_

Did a physical injury result from this incident? If yes, please describe.

\_\_\_\_\_  
\_\_\_\_\_

Is there any additional information?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This complaint is filed based on my honest belief that \_\_\_\_\_  
has created a harassing or hostile school environment. I hereby certify that the information I have provided in this  
complaint is true, correct, and complete to the best of my knowledge. I understand that false accusations of harassment  
or bullying will be subject to discipline actions or other appropriate sanctions.

Signature (if person reporting is not anonymous): \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

**Thank you for reporting!**



**(FOR OFFICE USE ONLY)**

Received by: \_\_\_\_\_ Date received: \_\_\_\_\_

Was the victim absent from school as a result of the incident? Yes  No  If yes, please describe.

\_\_\_\_\_

Action taken by (name): \_\_\_\_\_

Student Conference  Parent Contact  Disciplinary Action  Referred as Formal Complaint

Neutral 3rd Party Conference  Other  \_\_\_\_\_

Incident(s) reported for **same targeted student and bully**  1  2  3

Parent/guardian contacted: \_\_\_\_\_

Referred to: \_\_\_\_\_

Follow-up plan: \_\_\_\_\_

DISTRIBUTION: Copy to Superintendent's Office on **third incident reported for same targeted student and bully**, for  
Compliance Officer review