Placentia-Yorba Linda Unified School District
Student Support Services

Bullying Report and Incident Form

Definition: Bullying is defined as any severe or pervasive physical or verbal act or conduct, including communications made in writing or by means of an electronic act that has the effect of or can reasonably be predicted to have the effect of:

- *Placing a reasonable pupil in fear of* ***harm to his or her person or property;***
- *Causing a reasonable pupil to experience a substantially detrimental effect on his or her* ***physical or mental health;***
- *Causing a reasonable pupil to experience substantial interference with his or her* ***academic performance****; or*
- *Causing a reasonable pupil to experience substantial interference with his or her* ***ability to participate in or benefit from the services, activities, or privileges provided by a school.***

These acts are intentional and are conducted in the context of an imbalance of power; for example the offender is significantly older, stronger or a group of students are doing it to a single student. Such acts are prohibited and will not be tolerated. This includes the misuse of technology for the same purpose.

Directions: This form is to be used to report alleged incidents of bullying by the **student, student witness, parent/guardian, relative, or school staff**. Please complete all sections of the form and return to the Principal or Vice Principal. Please print.

Date _____ School _____

PERSON REPORTING INCIDENT

Name :_____Phone:_____Email: _____

☐ Student ☐ Student (witness/bystander) ☐ Parent/guardian ☐ Close adult relative ☐ School staff

Date(s) incident(s) occurred: _____/_____/_____ _____/_____/_____ _____/_____/_____
Month Day Year Month Day Year Month Day Year

Name of student victim(s): _____ Age(s): _____

Name(s) of alleged offender(s) (If known):	Age(s)	School (s) (if known)	is he/she a student?
_____	_____	_____	☐ Yes ☐ No
_____	_____	_____	☐ Yes ☐ No
_____	_____	_____	☐ Yes ☐ No

Type of Bullying (check all that apply):

☐ Name calling/offensive remarks ☐ Exclusion ☐ Hit, kicked, punched ☐ Told lies or false rumors ☐ Threatened

☐ Racial comments ☐ Sexual comments ☐ Took/damaged possessions ☐ Electronic communications (Please explain)

☐ Other/Explanation: _____

Where did the bullying happen (check all that apply):

☐ Field ☐ Hallway ☐ In class with teacher ☐ In class without teacher ☐ Bathroom

☐ Line-up areas ☐ Lunchroom ☐ To/from school ☐ Bus stop ☐ Bus

☐ Other: _____

People the victim has spoken to about the bullying incident (check all that apply):

☐ Teacher ☐ Other adult at school ☐ Parent/guardian ☐ Sibling ☐ Friend ☐ Close adult relative

What did the alleged offender(s) say or do? (Attached statement required).

Did a physical injury result from this incident?

☐ No ☐ Yes, but it did not require medical attention ☐ Yes, and it required medical attention (please explain)

Medical attention required: _____

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

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

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 student involved in a bullying incident and the remedial action taken, to the extent permitted by law, based on a confirmed report.

Signature: _____ Date: _____

☐ Please check if you would like to remain anonymous.