

Ellsworth School Department

Bullying and Cyberbullying Reporting Form

Bullying or suspected bullying is reportable in person or in writing (including anonymously) to school personnel.

Upon completion of this form, or when providing a verbal report, submit to designated school personnel or administrative office.

Date the alleged incident of bullying is being reported: _____

Person(s) reporting the alleged incident(s) of bullying (this is optional as reports can be made anonymously, except when reported by staff, coaches and advisors): _____

Person(s) completing this form (if different than person listed above and not anonymously reporting): _____

Person reporting is: student parent grandparent guardian
 school staff coach advisor other _____

Contact information of person reporting (optional):

Home or work phone: () _____ Cell phone: () _____

Email: _____

Home address: _____

Details

Name of student(s) who is believed to have been bullied:

Name of the student(s) or adult(s) who is alleged to have bullied: _____

Date(s): _____

Time(s)/time(s) of day: _____

Location(s) of incident(s): _____

Were there any witnesses? yes no

May the school personnel conducting an investigation contact these witnesses?

yes no

If so, please provide names of witnesses to be contacted during the investigation:

Please provide a description of incident(s) and include any supporting documentation:

(use additional pages, if needed)

I agree that the information on this form is accurate and true to the best of my knowledge and belief.

_____ Date: _____
 Signature of person reporting (optional)

Received by: _____ Date: _____

Position/title: _____

Copy to school principal on: _____
Date

Copy received: _____ Date: _____
Signature of school principal

Copy to superintendent on: _____
Date

Copy received: _____ Date: _____
Signature of superintendent