



BELLEVILLE PUBLIC SCHOOLS
Office of the Superintendent

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HARASSMENT, INTIMIDATION & BULLYING
REPORTING FORM*

Assigned Case # _____
Admin Use: Verbally Reported to the Principal or Designee on: (mm/dd/yy) _____

High School Middle School School # _____

Name of Alleged Victim(s): _____

Name of Alleged Offender(s): _____

Date of Alleged Incident: _____

Time of Alleged Incident: _____

Check all actual or perceived characteristics that were or may have been motivational factors in the alleged HIB incident:

- | | |
|--|---|
| <input type="checkbox"/> Race | <input type="checkbox"/> Gender |
| <input type="checkbox"/> Color | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Religion | <input type="checkbox"/> Gender Identity or Expression |
| <input type="checkbox"/> Ancestry | <input type="checkbox"/> Mental or Physical or Sensory Disability |
| <input type="checkbox"/> National Origin | <input type="checkbox"/> Physical Attribute |

Other actual or perceived characteristics (Please describe): _____

Explain the location of the alleged HIB incident. Check all that apply and specify/describe the location:

- School Property: _____
- School Sponsored Function: _____
- School Bus: _____
- Off School Grounds: _____

Identify what harm you believe was or may have been caused by the alleged incident. Check all that apply:

- Substantial disruption/interference with the orderly operation of the school
- Substantial disruption/interference with the rights of others

Detail the effects that the circumstances of the alleged incident had on the alleged victim(s). Check all that apply:

- Physical or emotional harm
- Insulted or demeaned alleged victim
- Other (Please describe): _____
- Created a hostile educational environment
- Interfered with a student's education

Mode of alleged incident:

- Gesture
- Written
- Verbal
- Physical
- Electronic Communication

Please describe the nature of alleged harassment, intimidation or bullying. Include any relevant written, verbal or physical act(s), or any electronic communication (attach any additional sheets if necessary).

Please describe what harm you believe was caused to the alleged victim(s) and the basis for your belief.

Additional sheets attached: Yes
 No

Name of Person Reporting: _____

Signature: _____

Date: _____

* This form must be completed within two days of the verbal report to the Principal or Designee