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) 

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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

Form Updated October 2016