Harassment, Intimidation, and Bullying Incident Report Form

Harassment is defined as a continuous pattern of intentional behavior, and includes but is not limited to written, electronic, verbal, physical act, or gesture by an individual or group that is reasonably perceived to be threatening by the student-victim.

In an effort to minimize this type of behavior in the school environment, which includes on school property, at a school sponsored event, on a school bus, or on an electronic device accessed on school property or at a school event, the SCBOE has created a process whereby a student, parent, guardian, or bystander may report instances of harassment to the school administrator for further review and investigation. Upon completion of this reporting form, please submit the form to an administrator, counselor, or teacher. All reported incidents of harassment are investigated, and when necessary, school administrators apply appropriate disciplinary consequences.

Reporter Information:

Have you submitted a harassment report form previously?

☐ Yes  ☐ No

Have you contacted an adult regarding this issue?

☐ Yes  ☐ No

Reporter’s Name (optional): ______________________________________________________

School Name: _________________________________________________________________________________________________

You are:

☐ Student  ☐ Relative  ☐ Other (please specify)  ☐ Other

☐ Parent/Guardian  ☐ School Staff

You are:

☐ Victim  ☐ Witness/Bystander  ☐ Other (please specify)

If you would like someone to contact you, please provide your phone number: _________________

Incident Information:

Date of Incident: ____________________________  Time of Incident: ____________________________

Name of the victim: _________________________________________________________________________________________________

Name of the alleged aggressor: _________________________________________________________________________________________

Are there any additional witnesses to the alleged event?

☐ Yes  ☐ No  ☐ Unsure

If yes, please provide names and grade level information. If you are not sure of the names, please describe him/her/them.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
Location of Incident:
- School Campus (specify campus): ______________________________
- School Event (specify event and location): ____________________
- School Bus (specify bus number): _____________________________
- Electronic Device (possible screenshots to accompany this form is helpful)
- Other (please specify) ________________________________

Type of Harassment (please check all that apply):
- Moderate physical contact (shoving, pushing, snatching personal property, etc.)
- Severe physical contact (hitting, punching, kicking, spitting, etc.)
- Stalking either in person or online
- Teasing/name calling/demeaning jokes
- Verbal intimidation
- Inappropriate gesturing
- Theft
- Exclusion/rejection
- Destruction of property
- Sexual contact
- Verbal harassment
- Spreading rumors
- Threats
- Electronic communication (texts, sexts, email, etc.)
- Public humiliation/ridicule
- Cyberbullying/cyberharassment/trolling

This behavior is:
- Related to student’s perceived sexual orientation or gender identity
- Related to student’s religious beliefs
- Related to student’s racial or cultural background
- Related to student’s disability
- Other: ________________________________
- None of the above descriptions apply to this situation

Please describe this incident and include as many details as possible (attach additional pages, screenshots, photos, letters, texts, etc.):
_________________________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________________________

Did a physical injury occur from this incident?
- No
- Yes, but it did not require medical attention
- Yes, and it required medical attention (specify): ________________________________

Did the victim miss school due the incident?
- Yes If yes, how many days was the student absent as a result of the incident? ______
- No
Is there any additional information that you would like to provide?

I certify that there is no falsification of the above information and events are accurately depicted to the best of my knowledge.

Signature of Reporter Date

For Office Use Only:

Date Submitted: _________ Person Receiving Report: ____________________________________________________________

Investigated by: __________________________ Position: __________________________

Final report of investigation of bullying complaint by ___________________________ against ___________________________, alleged offender

In my/our investigation of the complaint, it is found (check appropriate response):

☐ Found grounds to substantiate the allegations
☐ Did not find grounds to substantiate the allegations
☐ Did not find enough information to make a judgement on the allegations

Summary of investigation, findings, and disciplinary action:

Victim Parent/Guardian contacted?

☐ Yes Date: _______________ ☐ No

Agressor Parent/Guardian contacted

☐ Yes Date: _______________ ☐ No

Signature of Investigator Date

Signature of Principal (if not investigator) Date