| Arizona Middl   | e School  |
|---|---|
| BULLYING/HARASSMENT (<br>(Students May Report A   |   |
| Date Filed: Nat   | me:   |
| Address: Hom  |   |
| CityZipCode:  |   |
| Please Identify yourself as a:<br>Student Parent/Guardian Employee  | Volunteer Other   |
| Please check the type of bullying that has occurre  | ed (more than once can be checked):   |
| Verbal Abuse<br>(name-calling, racial remarks, belittling, etc.<br>Can be done over the phone, in writing,<br>In person, over then phone, text, email)  | Physical<br>( hitting, kicking, shoving, twisting limbs,<br>spitting, or destroying personal belongings)  |
| Extortion<br>(verbal or physical bullying for money<br>or personal items)   | Hazing<br>(having to participate in an act of physical or<br>emotional harm to be part of a group, or<br>are a victim of a group)                         |
| Indirect Bullying<br>(rejection, exclusion, ignoring, alienating or<br>Isolating to purposely cause emotional distress)   | Cyberbullying<br>(using technology to harass, threaten, or<br>target another person- text, IM's, email,<br>Facebook, videos, Myspace, etc.)               |
| Dates of alleged bullying or harassment(s):   |   |
| Person(s) alleged to have committed the bullying or h   | arassment:  |
| Description of the incident. Use specific dates, times, backside form or additional sheets if necessary.  | locations, names, etc. if possible. Use the   |
|   |   |
| Have you reported this to anyone else: Yes_N  | No_Ifso, who?   |
| Sign of Reporting Person  | Date  |
| e: Completion of this form will initiate an investigation of<br>ined in this form. All information will be confidential ex<br>stigation. Submission of a good faith or complaint or rep<br>plainant or reporter's future employment, grades, learnin<br>signing above, you are verifying that your statements are | cept for that which must be shared as part of the<br>port of bullying or harassment will not affect the<br>ag, or working environment or work assignment. |