



SECONDARY STUDENT HARASSMENT/BULLYING REPORT

SS 1020

Reporting Person _____ This is an anonymous report

School _____ Today's Date _____ Date of Incident _____

Who was harassed/bullied:

Who do you think did it:

Observer/bystanders:

Three sets of horizontal lines for writing names.

What happened: (check all that apply)

- Verbal or physical taunts, Rude or threatening gestures, Hurtful rumors, Exclusion/rejection, Intimidation/threats, Damage/theft of personal items, Physical injury, Cyber-bullying (written, pictures), Racial comments, Sexual Harassment: Verbal, Physical, Gestures, Pictures

Where did it happen? (Check all that apply)

- Hallway, Restrooms, Cafeteria, Class - _____, Online (phone/internet), Computer lab, Band/chorus room, Gym, Locker room, Athletic Fields/Track, Parking lot/other outside area, Bus, Bus stop, Bus lot

Was anyone physically hurt? Yes No Don't know

If yes, describe injury _____

Did any absences occur as a result? Yes No Don't know

If yes, how many days? _____

Is this the first time this has occurred? Yes No If no, # of times _____

Have previous reports been filed? Yes No

Who has been told about this situation? (Check all that apply)

- Teacher, Counselor, Staff, Family member, Friend, Other

Additional information you would like the school to know _____

Please give completed form to designated staff at school.