

WASHINGTON STATE HARASSMENT, INTIMIDATION OR BULLYING

Incident Reporting Form

Reporting person (optional): \_\_\_\_\_

Today's date: \_\_\_\_\_

Targeted student: \_\_\_\_\_

Your e-mail address (optional): \_\_\_\_\_

Your phone number (optional): \_\_\_\_\_

Name of school adult you've already contacted (if any): \_\_\_\_\_

Name(s) of bullies (if known): \_\_\_\_\_

Dates the incident(s) happen(ed) (if known):

Where did the incident happen? Circle all that apply.

- |                          |                  |                           |             |                     |
|--------------------------|------------------|---------------------------|-------------|---------------------|
| Classroom                | Hallway/Restroom | Playground                | Locker room | Lunchroom           |
| Parking lot              | School bus       | Internet                  | Cell phone  | Sport field         |
| During a school activity |                  | On the way to/from school |             | Off school property |

Other (please describe):

Please check the box(es) that best describe what the bully did (check all that apply):

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student.
- Getting another person to hit or harm the student.
- Teasing, name calling, making critical remarks or threatening in person, by phone, by e-mail, etc.
- Putting the student down and/or making them a target of jokes.
- Making rude and/or threatening gestures
- Excluding or rejecting the student.
- Making the student fearful, demanding money or exploiting them.
- Spreading harmful rumors or gossip.
- Cyber bullying (bullying by calling, texting, e-mailing, web posting, etc).
- Other

If you selected "Other", please describe:

\_\_\_\_\_

Why do you think the harassment, intimidation or bullying occurred?

\_\_\_\_\_

Were there any witnesses? Yes  No  If yes, please provide their names:

\_\_\_\_\_

\_\_\_\_\_

Did a physical injury result from this incident? If yes, please describe:

\_\_\_\_\_

Was the target absent from school as a result of this incident? Yes  No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

Is there any additional information? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Thank you for reporting!

----- For Office Use -----

Received by: \_\_\_\_\_

Date received: \_\_\_\_\_

Action taken: \_\_\_\_\_

Parent/guardian contacted: \_\_\_\_\_

Circle One: Resolved Unresolved

Referred to: \_\_\_\_\_