

APPENDIX A

BULLYING PREVENTION AND INTERVENTION INCIDENT REPORTING FORM

Date: _____

1. Name of Reporter/Person Filing the Report:

(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)

2. Check whether you are the: Target of the behavior Reporter (not the target)

3. Check whether you are a: Student Staff member (specify role) _____

Parent Administrator Other (specify) _____

Provide your contact information/telephone number: _____

4. If you are a student, state your grade: _____

5. Information about the Incident:

Name of Target (of behavior): _____

Name of Aggressor (Person who engaged in the behavior): _____

Date(s) and Times of Incident(s):

Location of Incident(s) (Be as specific as possible): _____

6. Witnesses (List people who saw the incident or have information about it):

Name: _____ Student Staff

Other _____

Name: _____ Student Staff

Other _____

Name: _____ Student Staff

Other _____

7. Describe the incident (include the names of people involved, what occurred, and what each person did and said, including the specific words used). Please use additional space on back if necessary.