### BULLYING PREVENTION AND INTERVENTION INCIDENT REPORTING FORM

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)

   Your contact information/telephone number:________________________________________

4. **If student, state your school:** ___________________________ **Grade:** ____________

5. **If staff member, state your school or work site:** ____________________________

6. **Information about the Incident:**

   **Name of Target (of behavior):** ____________________________________________

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

   **Date(s) of Incident(s):** ____________________________________________________

   **Time When Incident(s) Occurred:** ___________________________________________

   **Location of Incident(s) (Be as specific as possible):** __________________________

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

   **Name:** ___________________________________________ **Student** **Staff** **Other**

   **Name:** ___________________________________________ **Student** **Staff** **Other**

   **Name:** ___________________________________________ **Student** **Staff** **Other**

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

1. Investigator(s): __________________________ Position(s): __________________________

2. Interviews:
   - Interviewed aggressor Name: __________________________ Date: __________________
   - Interviewed target Name: __________________________ Date: __________________
   - Interviewed witnesses Name: __________________________ Date: __________________

3. Any prior documented Incidents by the aggressor?  □ Yes  □ No
   - If yes, have incidents involved target or target group previously?  □ Yes  □ No
   - Any previous incidents with findings of BULLYING, RETALIATION  □ Yes  □ No

Summary of Investigation:

(Please use additional paper and attach to this document as needed)

III. CONCLUSIONS FROM THE INVESTIGATION

1. Finding of bullying or retaliation:
   - □ YES  □ NO
     - □ Bullying  □ Incident documented as __________________________
     - □ Retaliation  □ Discipline referral only __________________________

2. Contacts:
   - □ Target's parent/guardian Date: ______________  □ Aggressor's parent/guardian Date: ______________
   - □ Superintendent Date: ______________  □ Law Enforcement Date: ______________

3. Action Taken:
   - □ Loss of Privileges □ Detention □ STEP referral □ Suspension

   □ Community Service □ Education □ Other __________________________

4. Describe Safety Planning:
   - Follow-up with Target: scheduled for ______________ Initial and date when completed: ______________
   - Follow-up with Aggressor: scheduled for ______________ Initial and date when completed: ______________

Report forwarded to Principal: Date __________________ Report forwarded to Superintendent: Date __________________
(If principal was not the investigator)

Signature and Title: ___________________________________________________  Date: ____________________