

**Parent/Student Form for Reporting Possible Bullying Behavior**

**Bullying Definition:** Any severe or pervasive physical or verbal act or conduct, including communications made in writing or by means of an electronic act by a student, or a group of students, directed against another student with the intent to ridicule, harass, humiliate, or intimidate the other student while on school grounds, traveling to or from school, or at a school-sponsored activity which substantially disrupts the educational environment.

***Report will be investigated no later than the end of the next school day and report of outcome to parent within 3 days. The school is not permitted to provide information about other students or discipline issued to other students with the reporting parent.***

Name of Student (Target): \_\_\_\_\_ DOB \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher/Counselor: \_\_\_\_\_  
Parent Name : \_\_\_\_\_ Tel/Cell: \_\_\_\_\_ Email: \_\_\_\_\_  
Full Name of Offending Person(s): \_\_\_\_\_ Grade: \_\_\_\_\_  
Date of Report: \_\_\_\_\_

- 1. Give details of your concerns including dates/times, location(s), witnesses, etc. Please provide specific examples of the offensive conduct. (Use back-side if necessary.)**

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- 2. What remedy are you seeking?**

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- 3. Describe the informal efforts that you have made to correct the situation described in #1.**

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**ANONYMOUS REPORT:**

1. Please DO NOT use my child's name while investigating and why (signature) \_\_\_\_\_

Why not? \_\_\_\_\_

2. It is ok to use my child's name while investigating (signature) \_\_\_\_\_

**TO BE COMPLETED BY SCHOOL**

Date Report Received at School: \_\_\_\_\_

Date Investigated: \_\_\_\_\_ By Whom: \_\_\_\_\_

Date Parent Notified of Outcome: \_\_\_\_\_ By Whom: \_\_\_\_\_

Bullying Verified: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

Original: School Site