

**Bullying and Cyberbullying Reporting Form**

***Bullying or suspected bullying is reportable in person or in writing (including anonymously) to school personnel.***

**Upon completion of this form, or when providing a verbal report, submit to designated school personnel or administrative office.**

Date the alleged incident of bullying is being reported: \_\_\_\_\_

Person(s) reporting the alleged incident(s) of bullying (this is optional as reports can be made anonymously, except when reported by staff, coaches and advisors): \_\_\_\_\_

Person(s) completing this form (if different than person listed above and not anonymously reporting): \_\_\_\_\_

Person reporting is:          student          parent          grandparent          guardian  
   school staff    coach                    advisor          other \_\_\_\_\_

Contact information of person reporting (optional):  
home or work phone: ( ) \_\_\_\_\_ Cell phone: ( ) \_\_\_\_\_  
email: \_\_\_\_\_  
home address: \_\_\_\_\_

**Details**

Name of student(s) who is believed to have been bullied:  
\_\_\_\_\_

Name of the student(s) or adult(s) who is alleged to have bullied: \_\_\_\_\_

Date(s): \_\_\_\_\_  
Time(s)/time(s) of day: \_\_\_\_\_  
Location(s) of incident(s): \_\_\_\_\_

Were there any witnesses?  yes  no  
May the school personnel conducting an investigation contact these witnesses?  
 yes  no  
If so, please provide names of witnesses to be contacted during the investigation:  
\_\_\_\_\_  
\_\_\_\_\_

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Please provide a description of incident(s) and include any supporting documentation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(use additional pages, if needed)

I agree that the information on this form is accurate and true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of person reporting (optional) Date: \_\_\_\_\_

\*\*\*\*\*

Received by: \_\_\_\_\_ Date: \_\_\_\_\_  
Position/title: \_\_\_\_\_

Copy to school principal on: \_\_\_\_\_  
Date

Copy received: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of school principal

Copy to superintendent on: \_\_\_\_\_  
Date

Copy received: \_\_\_\_\_ Date: \_\_\_\_\_  
Signature of superintendent