APPENDIX A

Bullying Prevention and Intervention Incident Reporting Form

I. REPORT

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:** _____

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6. **Information about the Incident(s):**

Name(s) of alleged Target(s) (of behavior): _____

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

Date(s) of Incident(s): _____

Time(s) When Incident(s) Occurred: _____

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

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

Name: _____ • Student • Staff • Other _____

Name: _____ • Student • Staff • Other _____

Name: _____ • Student • Staff • Other _____

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

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9. **Signature of Person Filing this Report:** _____ **Date:** _____
(Note: Reports may be filed anonymously.)

APPENDIX A

FOR ADMINISTRATIVE USE ONLY

10. Form Given to: _____ **Position:** _____ **Date:** _____

Signature: _____

II. INVESTIGATION

1. Investigator(s):_____ **Position(s):**_____

2. Interviews:

□ Interviewed alleged aggressor(s) Name: _____ Date: _____
□ Interviewed alleged target(s) Name: _____ Date: _____
□ Interviewed alleged witness(es) Name: _____ Date: _____
Name: _____ Date: _____

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

4. 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(s) Date:_____ □ Aggressor's parent/guardian(s) Date: _____
□ Law Enforcement Date: _____

3. Action Taken:

□ Loss of Privileges □ Detention □ SST referral □ Suspension □ Community Service □ Education
□ Other _____

4. Describe Safety Planning: _____

Follow-up with alleged Target: scheduled for _____ Initial and date when completed: _____
Follow-up with alleged 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:** _____