

Woodland Public Schools Harassment, Intimidation or Bullying (HIB)**Incident Reporting Form****Reporting person** (optional): _____**Targeted student:** _____**Your email address** (optional): _____**Your phone number** (optional): _____ **Today's date:** _____**Name of school adult you've already contacted** (if any): _____**Name(s) of bullies** (if known):
_____**On what dates did the incident(s) happen** (if known):
_____**Where did the incident happen?** Circle all that apply.

Classroom	Hallway	Restroom	Playground	Locker room	Lunchroom	Sport field
Parking lot	School bus	Internet	Cell phone	During a school activity	Off school property	
On the way to/from school						

Other (Please describe.) _____

Please check the box that best describes what the bully did. Please choose all that apply.

- ☐ Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
- ☐ Getting another person to hit or harm the student
- ☐ Teasing, name calling, making critical remarks or threatening in person, by phone, by e-mail, etc.
- ☐ Putting the student down and making the student a target of jokes
- ☐ Making rude and/or threatening gestures
- ☐ Excluding or rejecting the student
- ☐ Making the student fearful, demanding money or exploiting
- ☐ Spreading harmful rumors or gossip
- ☐ Cyber bullying (bullying by calling, texting, emailing, web posting, etc.)
- ☐ Other

If you select other, please describe: _____

Why do you think the harassment, intimidation or bullying occurred?

Were there any witnesses? Yes ☐ No ☐ If yes, please provide their names:

Did a physical injury result from this incident? Yes ☐ No ☐ If yes, please describe.

Was the target absent from school as a result of the incident? Yes ☐ No ☐ If yes, please describe.

Is there any additional information?

Thank you for reporting!

-----**For Office Use**-----

Received by: _____

Date received: _____

Action taken: _____

Parent/guardian contacted: _____

Circle one: **Resolved** **Unresolved**

Referred to: _____