

Help, I feel like I have been bullied.

INSTRUCTIONS: If a K-2 grade student reports they have been bullied, please assist them in completing this form.

What is your name? _____

Name of person assisting you (if anyone) with this form? _____

Who hurt your feelings? _____

What did they do or say? _____

Please check the box (s):



hitting



kicking



name calling



pushing



tripping



making fun of you

Other _____

When did this happen? _____

Where did this happen? _____

Who did you tell? _____

Has this happened before? _____

How did you respond? _____

Please tell us who saw this happen.

1. _____

2. _____

3. _____

Signature _____

Date _____

This matter has been reviewed and has been found substantiated unsubstantiated

Signature of Investigating Personnel _____

Date Complete _____

5. What did the alleged offender(s) say or do (Attach additional paper, if necessary)?

6. Name(s) of witness(es): (Please Print)

Is he/she a staff member?

_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

7. Why do you believe the bullying, harassment or intimidation occurs (Attach additional paper, if necessary)?

8. Did a physical injury result from this incident? Place an X next to one of the following:

No Yes, but it did not require medical attention Yes, and it required medical attention

9. Please place an X next to the statement(s) that best describes what happened and frequency on the line after statement (choose all that apply):

- Name-calling, making direct or veiled threats or by other means: _____
- Demeaning and making the victim of jokes: _____
- Making rude and/or threatening gestures: _____
- Intimidating (bullying), extorting, or exploiting: _____
- Spreading harmful rumors or gossip: _____
- Electronic Communication (specify) _____
- Other (specify) _____

10. How did you respond to the offender'(s)' bullying, harassment, and/or intimidation (attach more paper, if needed)?

11. Was the student victim absent from school as a result of the incident? Yes No

If yes, how many days was the student victim absent from school as a result of the incident? _____

By signing this report form, I attest that all information on this form is accurate to the best of my knowledge and I understand the serious nature of this report. By signing this report form, I understand and agree to be contacted by school, local, state or federal authorities to assist in the matters of this report. Furthermore, I am well intentioned in completing this form and understand disciplinary action, up to and including a recommendation for termination of my employment, if it is evident this document has been completed with less than honorable intentions.

This matter has been reviewed and has been found substantiated unsubstantiated

Signature of Investigating Personnel

Date Completed