

**BULLYING INCIDENT REPORT FORM**

If you have been the target of bullying or have witnessed the bullying of a Smithton student, complete this form and submit to the building principal or counselor. Complaints against building principals should be submitted to the Superintendent. Complaints against the Superintendent should be submitted to the Board of Education. Reports of bullying will be investigated and disciplinary action will be taken as warranted.

Date Filed: \_\_\_\_\_ Your Name\*: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Indicate the appropriate response to the following with a check mark(s):

- You are a: \_\_\_\_\_ Student \_\_\_\_\_ Parent \_\_\_\_\_ Employee \_\_\_\_\_ Volunteer

Date(s) of alleged bullying: \_\_\_\_\_

Name of student(s) subjected to bullying: \_\_\_\_\_

Person(s) alleged to have committed the bullying or harassment: \_\_\_\_\_

Summarize the incident(s) or occurrence(s) of bullying as accurately as possible. Attach additional sheets or use back side of the form, if necessary:

Name of Witnesses: \_\_\_\_\_

Have you reported this to anyone else?: \_\_\_\_\_ Yes \_\_\_\_\_ No. If so, who? \_\_\_\_\_

\*Signature of Complainant: \_\_\_\_\_

**\*Students have the right to complete this form anonymously. However, it will be easier for the District to investigate this matter if as much information as possible is provided. Submission of a good faith complaint or report of bullying or harassment will not affect the complainant or reporter's future employment, grades, learning, or working environment. A complainant that falsely accuses someone will be subject to disciplinary action.**

**THIS SECTION IS FOR THE USE OF DISTRICT ADMINISTRATION**

Date Received by Principal: \_\_\_\_\_

Investigative Action taken: \_\_\_\_\_

Result of Investigation? Action taken: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_