



Harassment, Intimidation, or Bullying (HIB) Incident Reporting Form

School: _____ Date: _____

Confidential Report Anonymous Report Non-Confidential Third Party

Reporting Person(s): _____

Phone # (optional): _____ Email Address (optional): _____

Name(s) of Bully(ies) (if known): _____

Victim/Targeted Student(s) – (may be the same as the person reporting): _____

Name of school adult you've already contacted (if any): _____

On what date(s) / time(s) of day did the incident(s) happen? _____

Where did the incident happen? (Circle all that apply)

- | | | | | |
|-----------|------------|-------------|-----------------------|---------------------------|
| Classroom | Restroom | Parking Lot | Playground | During a School Activity |
| Hallway | School Bus | Playground | Sport Field | On the Way to/from School |
| Lunchroom | Bus Stop | Locker Room | Internet / Cell phone | Off School Property |

Other (Please describe) _____

Please check the box that best describes what the bully did. (Select all that apply)

- Hit, kicked, shoved, spat on, pulled hair, or threw something at the student
- Got another person to hit or harm the student
- Teased, name called, made critical remarks, or threatened in person, by phone, by e-mail, etc.
- Put the student down and made the student a target of jokes
- Made rude and/or threatening gestures
- Inappropriate touch

- _____ Made the student fearful, demanded money, or exploited
- _____ Spread harmful rumors or gossip
- _____ Cyberbullied (bullied by calling, texting, emailing, web posting, etc.)
- _____ Other

If you select other, please describe: _____

Please describe the event: _____

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? If yes, please describe.

Was the target/victim 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: _____ (Administrator)
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Action taken and consequence to the student:

Date and time parent/guardian contacted, and parent comments:

The matter has been (circle one): **Resolved** **Unresolved**

If the matter has been referred to someone, who? _____

Is this the bully's first offense? Yes No **If no, please explain:** _____

Other notes of importance: