

**Instructions**

1. Download form.
2. Fill in as much information as possible.
3. Save form.
4. Click "Email Form" button to send.



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

**Email 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) \_\_\_\_\_

**School Site** (if applicable): \_\_\_\_\_

**Name(s) of bullies** (if known):

**On what dates did the incident(s) happen** (if known):

**Where did the incident happen?** Check all that apply.

- |   |  |  |                                     |                                      |                                    |
|---|--|--|-------------------------------------|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Classroom                | <input type="checkbox"/> Hallway             | <input type="checkbox"/> Restroom                  | <input type="checkbox"/> Playground | <input type="checkbox"/> Locker room | <input type="checkbox"/> Lunchroom |
| <input type="checkbox"/> Sport field              | <input type="checkbox"/> Parking lot         | <input type="checkbox"/> School bus                | <input type="checkbox"/> Internet   | <input type="checkbox"/> Cell phone  |                                    |
| <input type="checkbox"/> During a school activity | <input type="checkbox"/> Off school property | <input type="checkbox"/> 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:

Is this sexual harassment?  Yes  No

Is the sexual harassment severe, persistent, or pervasive?  Yes  No

Does the sexual harassment affect the student's education?  Yes  No

Does the sexual harassment create a hostile or abusive educational environment?  Yes  No

**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 absent from school as a result of the incident?**  Yes  No  
**If yes, please describe:**

**Is there any additional information?**