

STAFF BULLYING REPORT FORM

Instructions: Please complete **both** pages, responding to all the questions as accurately as possible. If you are unsure of the answer to any question, please indicate so. School policy allows for the district to take disciplinary action against school staff who have knowledge/reasonable suspicion of a violation of the bullying policy and fail to report it.

Describe what happened/what is happening:

When did it happen?

Date: _____

Time: _____ A.M./P.M.

☐ Before school

☐ After school

☐ During school

☐ Unsure

Where did it happen?

☐ School building (list specific room): _____

☐ School playground

☐ School parking lot

☐ On the bus

☐ Online

☐ At a school event (list specific event): _____

☐ Other (please specify): _____

☐ Unsure

Who was committing the bullying (if you're unsure of the bully's name(s) describe him/her)?

Who was the victim of the bullying (if you're unsure of his/her name, describe him/her)?

If the bullying occurred online, is there evidence that it was/has caused:

- ☐ A substantial disruption to the educational environment (e.g., staff prevented from carrying out duties, computer networks shut down, change in attendance patterns)
- ☐ A true threat (a statement, in light of the circumstances, a reasonable person would perceive as a serious expression of an intent to inflict harm)
- ☐ Unsure

If applicable, explain:

In your view, was the incident motivated by any of the following traits (actual or perceived)?

☐ Race ☐ Sex (includes sexual orientation)
☐ Color ☐ Status with regard to marriage or public assistance
☐ Religion ☐ Disability (Physical or mental)
☐ Unsure ☐ National origin ☐ N/A

Was the incident an act of retaliation against an individual who filed a previous bullying report and/or participated in an investigation? ☐ Yes ☐ No ☐ Unsure

Have you reported the incident to law enforcement? ☐ Yes ☐ No

Your Name: _____

Your School: _____

Phone Number: _____

Email: _____