

Bullying and Sexual Harassment Reporting Form

What occurred (please describe the incident/experience as best you can):

When did it occur:

Date:

Time:

Has it been going on for a while: ☐ Yes (please explain) ☐ No

Location of where it occurred (more specific information, better):

Who was involved (OPTIONAL, it is helpful to know):

Name(s) of perpetrator(s), if known: _____

Name(s) of victim(s): _____

Others who may be aware or witnessed incident(s) (witness, friend, someone else you reported it to): _____

Other information that might be useful:

Please submit the form to any reporting box, located in most classrooms, or in the school's office and library.