



# T.H. ROGERS SCHOOL

## BULLYING REPORT FORM

Bullying can be defined as repeated physical or emotional harm involving an imbalance of power. This is a form for reporting incidents of bullying, intimidation, or harassment involving any T.H. Rogers student. Please provide as much information as possible and return this form to Ms. Winn for elementary or Mr. Lam for middle school.

Today's date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

<b>PERSON REPORTING INCIDENT</b>	Name: _____
Telephone: _____	E-mail: _____
Place an X in the appropriate box: <input type="checkbox"/> Student <input type="checkbox"/> Student (Witness/Bystander) <input type="checkbox"/> Parent/guardian <input type="checkbox"/> Close adult relative <input type="checkbox"/> School Staff	

*Please provide as much information as possible based on your knowledge.*

1. Name of student victim: \_\_\_\_\_ Grade: \_\_\_\_\_

2. Name(s) of alleged offender(s) (If known): (Please print)	Age	School (if known)	Is he/she a student?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident happen?:  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Has this happened before?  
 No, this is the first time.  
 Yes, this has happened once before.  
 Yes, this is an ongoing problem.

5. Place an X next to the statement(s) that best describes what happened (choose all that apply):

- Physical: hitting, kicking, or other physical aggression
- Social/Emotional: starting rumors, excluding, or telling others not to be friends with someone
- Verbal: teasing, name-calling, or put-downs
- Cyber Bullying: using an electronic medium to engage in any bullying behavior
- Other (specify): \_\_\_\_\_

5. Where did the incident happen (choose all that apply)?

<input type="checkbox"/> Classroom	<input type="checkbox"/> PE	<input type="checkbox"/> Lunch	<input type="checkbox"/> Hallway
<input type="checkbox"/> Bus/Bus Stop	<input type="checkbox"/> Restroom	<input type="checkbox"/> Other _____	

6. What did the alleged offender(s) say or do?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Attach a separate sheet if necessary)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_