

Hampton School District Policy	<b>Section:</b> <u>J</u> <b>Code:</b> JICK-R <b>Title:</b> Pupil Safety and Violence Prevention – Reporting Form <b>Category:</b> Priority <b>Page:</b> 1 of 5
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**PUPIL SAFETY AND VIOLENCE PREVENTION (Bullying) - REPORTING FORM**

\_\_\_\_\_ School

Directions: The Board is committed to providing all pupils a safe and secure school environment. Conduct constituting bullying and/or cyberbullying will not be tolerated and is hereby prohibited. This is a form to report alleged bullying that occurred on school property; at a school-sponsored event either on or off-campus; on a school bus; or on the way to and/or from school. This form should be completed and returned to the Building Principal. Contact the school for additional information or assistance.

Today's Date: \_\_\_\_\_

**Person Reporting the Incident:**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Place an X in the appropriate box:

- Student                       Student (Witness/Bystander)  
 Parent/guardian             School staff member  
 Other (Please state: \_\_\_\_\_ )

**Information of Alleged Incident:**

- Name of student who was bullied: \_\_\_\_\_ Age: \_\_\_\_\_
- Name(s) of alleged offenders: \_\_\_\_\_ Age: \_\_\_\_\_  
 \_\_\_\_\_ Age: \_\_\_\_\_  
 \_\_\_\_\_ Age: \_\_\_\_\_
- Date(s) on which the alleged incident occurred: \_\_\_\_\_

<b>Adopted:</b> <b>Reviewed:</b> <b>Revised:</b> <b>Cancellation:</b>	<b>DATE:</b> January 9, 2012 January 3, 2012
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4. Place an X next to the statement(s) that best describe what happened (choose all that apply):

Any bullying that involves physical aggression

- Getting another person to hit or harm the student
- Teasing, name-calling, critical remarks, or threats
- Demeaning and making jokes of the alleged victim
- Rude or threatening gestures
- Intimidating, extorting, or exploiting
- Spreading harmful rumors or gossip
- Electronic communication (specify) \_\_\_\_\_
- Other (specify) \_\_\_\_\_

5. Where did the incident happen?

- On school property
- On a school bus
- At an off-campus school-sponsored activity
- On the way to/from school
- Off-campus (specify) \_\_\_\_\_

6. Where there any other witnesses present, and if so, who were they?

- Name: \_\_\_\_\_  Student  Staff  Other
- Name: \_\_\_\_\_  Student  Staff  Other
- Name: \_\_\_\_\_  Student  Staff  Other

<b>Adopted:</b>	<b>DATE:</b> January 9, 2012
<b>Reviewed:</b>	January 3, 2012
<b>Revised:</b>	
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7. Describe the incident in your own words, to the best of your ability. Include the names of the people involved, what occurred, and what each person did and said, including specific words used. Please use additional paper, if necessary.

**\*\*\*FOR ADMINISTRATIVE USE ONLY\*\*\***

1. Name and Title of Person Investigating this Report: \_\_\_\_\_ Date: \_\_\_\_\_

2. Names and dates of persons interviewed:

(1) Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student     Staff     Other

(2) Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student     Staff     Other

(3) Name: \_\_\_\_\_ Date: \_\_\_\_\_

Student     Staff     Other

3. Any prior documented incidents by the alleged aggressor?    Yes    No

4. Did the alleged victim report any of the following? (check all that apply)

Physical harm or damage to the victim's personal property

Emotional distress

Interference with educational opportunities

Fear of retaliation or reprisal

**Adopted:**            **DATE:** January 9, 2012  
**Reviewed:**        January 3, 2012  
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5. Plan to protect victim or witnesses from retaliation or reprisal (if applicable):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Notification of Parent/Guardian:

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Person spoken to: \_\_\_\_\_ Method of Communication: \_\_\_\_\_

7. Investigation:

(a) Date began: \_\_\_\_\_

(b) Persons interviewed:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

(c) Results and Findings of the Investigation:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(c) Date investigation completed: \_\_\_\_\_

(d) Date parents/guardians were contacted with results of the investigation: \_\_\_\_\_

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8. Conclusions of investigation:

- (a) Finding of bullying or retaliation:    Yes    No
- (b) If “No” the incident is documented as: \_\_\_\_\_
- (c) If “Yes” the District’s action taken:
  - Loss of privileges
  - Detention
  - Suspension
  - Other: \_\_\_\_\_

Signature and Title: \_\_\_\_\_ Date: \_\_\_\_\_

*See Also Policy JICK*

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