

**\*\*CONFIDENTIAL\*\***

**Bullying Report**

Person completing report: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date of Incident: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Victim(s): \_\_\_\_\_

Offender(s): \_\_\_\_\_

Witness(es): \_\_\_\_\_

Description: \_\_\_\_\_

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**Response by School Personnel**

Date Received: \_\_\_\_\_ Action taken: \_\_\_\_\_

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Parent Contacted?  Yes  No Comment: \_\_\_\_\_

\_\_\_\_\_ Initials: \_\_\_\_\_

Follow-up Date: \_\_\_\_\_ Comment: \_\_\_\_\_

\_\_\_\_\_ Initials: \_\_\_\_\_