

**Anonymous Report
for Harassment, Intimidation and Bullying**

Date of Alleged Incident _____ School _____ Today's Date _____

Describe the nature of alleged harassment, intimidation or bullying. Include any gesture, any relevant written, verbal or physical act(s), or any electronic communication (use back of form for additional space).

Location of alleged HIB incident. Check all that apply and specify/describe location:

School property: _____

School-sponsored function: _____

School bus: _____

Off school grounds: _____

Was someone supervising when the incident occurred?

_____ student parent staff other (_____)

_____ student parent staff other (_____)

_____ student parent staff other (_____)

_____ student parent staff other (_____)

List below any person who you know or have reason to believe may have relevant information and indicate if student, parent, staff member or other.

_____ student parent staff other (_____)

_____ student parent staff other (_____)

_____ student parent staff other (_____)

_____ student parent staff other (_____)