

## Bullying, Harassment, or Intimidation Reporting Form

Weatherford Independent School District  
1100 Longhorn Drive  
Weatherford, Texas 76086

Bullying, harassment, and intimidation are serious offenses and will not be tolerated in our schools. In fact, **Policy FFI and Policy FFH** prohibit such activities. Bullying occurs when a student or group of students engage in written or verbal expression, expression through electronic means, or physical conduct that:

- 1) Will have the effect of physically harming a student, damaging a student's property, or placing a student in reasonable fear of harm to the student's person or of damage to the student's property; or
- 2) Is sufficiently severe, persistent, or pervasive that the action or threat creates an intimidating, threatening, or abusive educational environment for a student.

The conduct is considered bullying if it:

- 1) Exploits an imbalance of power between the student perpetrator and the student victim through written or verbal expression or physical conduct; and
- 2) Interferes with a student's education or substantially disrupts the operation of a school.

**Directions:** This form is used to report alleged harassment and intimidation (bullying) that occurred on school property, at a school-sponsored activity/event on or off of school property, on a bus, on the way to and/or from school, in the current school year. If you are a student victim, the parent/guardian of a student victim, or a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged bullying, harassment, or intimidation, complete this form and return it to the principal or assistant principal at the student victim's school. Contact the school for additional information or assistance at any time. Reports of bullying should be made as soon as possible after the alleged act or knowledge of the alleged act. A failure to promptly report may impair the District's ability to investigate and address the prohibited conduct.

School \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

Person Reporting Incident: Name \_\_\_\_\_ Telephone: \_\_\_\_\_

Relation to Student Victim: \_\_\_\_\_ E-Mail: \_\_\_\_\_

1. Name of Student Victim: \_\_\_\_\_ Age: \_\_\_\_\_

2.

Name(s) of alleged offender(s) (if known)	Age	School (if known)	Is he/she a student?

3. On what date(s) did the incident happen?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Has there been a previous incident? Yes No If so, please explain what happened.

\_\_\_\_\_

\_\_\_\_\_

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

- On school property       At a school-sponsored       In the hallway       In the restroom  
 On a school bus       While waiting for the bus       On the way to/from school  
 Other: \_\_\_\_\_

6. Check the statement(s) that best describes what happened (choose all that apply):

- Hitting, kicking, shoving, spitting, hair pulling, or throwing something  
 Getting another person to hit or harm the student  
 Teasing, name-calling, making critical remarks, or threatening, in person or by other means  
 Demeaning and making the victim of pokes  
 Making rude and/or threatening gestures  
 Excluding or rejecting the student  
 Intimidating (bullying), extorting, or exploiting  
 Spreading harmful rumors or gossip  
 Other (specify) \_\_\_\_\_

7. What did the alleged offender(s) say or do? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Names of witness(es) \_\_\_\_\_

9. Why did the harassment or intimidation (bullying) occur? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Did a physical injury result from this incident?

- No       Yes, but it did not require medical attention       Yes, it required medical attention

11. If there was a physical injury, do you think there will be permanent effects?  No       Yes

12. Was the student victim absent from school as a result of the incident?       No       Yes

13. Is there any additional information you would like to provide? \_\_\_\_\_  
\_\_\_\_\_

14. If a teacher witnessed the incident, when and how was the parent notified? \_\_\_\_\_

\_\_\_\_\_  
Signature for Person Making Report

\_\_\_\_\_  
Signature of School Personnel

\_\_\_\_\_  
Date

**For office use only:**

Response/Follow Up: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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/s/ School Personnel                      Date

**Information on this form is protected by FERPA and is not to be released.**