

ABC Unified School District
Child Welfare & Attendance
Bullying Report Form (Confidential)



Name of Person Reporting Incident (optional): _____

Please circle your role: Student Parent/Guardian School Staff Community Member

Reporting Party Contact Information (optional): _____

Has the incident previously been reported (verbally/in writing) to school/district staff (circle)? Yes No

Details of Bullying Incident(s):

Name(s) of identified target(s) (optional): _____

Name(s) of alleged offender(s) (optional): _____

Date of incident Time of incident School where incident occurred

How often does the bullying occur (e.g. one time, weekly, daily): _____

How long has the bullying occurred?: _____

Location(s) of incident(s):

- Cafeteria/lunch area Classroom Gym/locker room Hallways/quad Off Campus
 Playground or recess Restroom Technology/social media Other: _____

Please select any of the following that you believe apply to the incident:

- Cyberbullying Damage of property Intimidation Physical violence Public humiliation
 Social bullying Threat to safety Unwanted physical contact Verbal abuse Other: _____

Please indicate if you believe the incident was related to discrimination based on any of the following:

- Disability Gender identity/expression Race/ethnicity Religion Sexual orientation Other: _____

Please describe the bullying incident(s) using as much detail as possible:

The reporting party may choose to remain anonymous. If you remain anonymous, please explain (optional):

Signature (optional): _____ **Date:** _____

Please return this form to the school site administrator to begin investigation.

Submitting this form verifies the information is true/correct to the best of your knowledge.

School Office:

1. School administrator/designee is to respond to the reporting party (if identified) within 2 school days of receipt of report
2. Provide written report of investigation within 10 school days to the reporting party and the alleged offender
3. File this form and report of investigation in a confidential and secure location (not in student cumulative folder)
4. Send a copy of both bullying report and principal/designee report of investigation to CW&A

Child Welfare & Attendance Ext. 21104

Fax: (562)926-5627