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*This Section is for use of District Administration*

Date Received by Principal: \_\_\_\_\_

Investigative Action taken: \_\_\_\_\_

Result of Investigation/Action taken: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

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**Discipline**

**Bullying**

**BULLYING INCIDENT REPORT FORM**

**If you have been the target of bullying or have witnessed the bullying of a District student, complete this form and submit to the building principal. Complaints against building principals should be submitted to the Superintendent. Complaints against the Superintendent should be submitted to the Board of Education. Reports of bullying will be investigated and disciplinary action will be taken as warranted.**

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

Name\*: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_

Indicate the appropriate response to the following with a check mark(s):

- You are a:  Student  Parent  Employee  Volunteer

Date(s) of alleged bullying: \_\_\_\_\_

Name of student(s) subjected to bullying: \_\_\_\_\_

Person(s) alleged to have committed the bullying or harassment: \_\_\_\_\_

Summarize the incident(s) or occurrence(s) of bullying as accurately as possible. Attach additional sheets or use back side of the form, if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Names of Witnesses: \_\_\_\_\_

Have you reported this to anyone else:  Yes  No. If so, who? \_\_\_\_\_

\*Signature of Complainant \_\_\_\_\_

**\*Students have the right to complete this form anonymously. However, it will be easier for the District to investigate this matter if as much information as possible is provided. Submission of a good faith complaint or report of bullying or harassment will not affect the complainant or reporter's future employment, grades, learning, or working environment. A complainant that falsely accuses someone will be subject to disciplinary action.**