This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act. Do not file in the cumulative record.

Theodore Roosevelt Elementary School
BULLYING INCIDENT REPORTING FORM

Directions: Incidents involving a serious threat to the safety of others should be reported to the Principal immediately. Please complete this form in its entirety and provide to school social worker (Michaelene Bernas). Teacher responsibilities include: investigating reported or witnessed incidents, imposing meaningful consequences on bully/aggressor when bullying incident is confirmed, contacting parents of all parties when bullying incident is confirmed. Repeated incidents should be referred to School Social Worker for intervention by filling out the **Bullying Situation Intervention Form**.

Date of Report:	**Name of Person Reporting Incident:**	
Name of student victim/target:	**Grade:**	**Teacher:**
Name(s) of alleged bully(ies)/aggressor(s):	**Grade:**	**Teacher:**
Name(s) of witness(es):		

Where did the incident(s) happen? (choose all that apply)

□ On the way to/from school
□ On school bus
□ At a school sponsored activity or event
□ On school property (specific location)_____
□ Online via technology
□ Other_____

Describe the incident (Be specific-include dates, times, location. Attach a separate sheet, if necessary)

Did a physical injury result from this incident?

□ No □ Yes, but it did not require medical attention □ Yes, and it required medical attention

Action taken:

Name all parents contacted: _____ **Date:** _____ **Role:** _____
_____ **Date:** _____ **Role:** _____
_____ **Date:** _____ **Role:** _____
_____ **Date:** _____ **Role:** _____

Outcome:

Teacher-Imposed Consequences: (please list)

Follow Up Action:

Signature:	**Title:**

Form modeled after John F. Kennedy High School/Middle School Harassment, Bullying, and Cyber-bullying Incident Reporting Form