North Beach School District No. 64
HARASSMENT, INTIMIDATION OR BULLYING (HIB)
INCIDENT REPORTING FORM

Reporting person (optional): ____________________________________________

Targeted student: ____________________________________________________

Your email address (optional): __________________________________________

Your phone number (optional): ___________________________ Today’s date: ____________________

Name of school adult you’ve already contacted (if any): __________________________

Name(s) of aggressor(s) (if known): __________________________________________

On what dates did the incident(s) happen (if known): ____________________________

Where did the incident happen? Check all that apply:

☐ Classroom ☐ Hallway ☐ Restroom ☐ Playground ☐ Locker room ☐ Lunchroom/Cafeteria ☐ Sport field
☐ Gym ☐ Parking Lot ☐ School bus ☐ Online/Internet ☐ Cell phone ☐ During a school activity
☐ Off school property ☐ On the way to/from school ☐ Other (please describe) __________________________

Please check the box that best describes what the bully did. Please choose all that apply.

☐ Blocked movement ☐ Gestures (Explain) ☐ Racial slur(s)
☐ Damage to my property ☐ Gossip ☐ Repeated behavior
☐ Derogatory comments ☐ Intimidation directed at me ☐ Sexual stories/jokes/pictures
☐ Disrespectful comments ☐ Name calling ☐ Sexual Orientation Slurs
☐ Electronic/Cyberbullying ☐ Offensive writing or graffiti ☐ Slurs, rumors, jokes
☐ Excluding me from activities ☐ Physical harm or threats of harm ☐ Spreading rumors
☐ Hazing (Club, team, class, other) ☐ Pranks ☐ Threats (to me, friends, school)
☐ Gender slurs ☐ Put downs ☐ Touching/grabbing

☐ Other: (Please describe)
Why do you think this occurred?

Were there any witnesses? Yes ☐ No ☐ If yes, please provide their names:

Did a physical injury result from this incident? Yes ☐ No ☐ If yes, please describe.

Was the targeted student absent from school as a result of the incident? Yes ☐ No ☐ If yes, please describe.

Are there any notes, pictures, texts, screen shots or other evidence of the event(s) you are reporting?

Is there any additional information you can add?

Thank you for reporting!

FOR OFFICE USE

Received by: ________________________________________________________

Date received: ______________________________________________________

Action taken: _______________________________________________________

Parent/Guardian contacted: ____________________________________________

Check one:
☐ Resolved   ☐ Unresolved

Referred to: ________________________________________________________