



Bullying or Harassment Reporting Form (Rev. 6/14) Middle and High School and Employee

This form should be used to report a possible incident of bullying as defined in the St. Johns County School District's Policy Prohibiting Bullying and Harassment.

Any student can report bullying or harassment by talking to an administrator or completing this form and returning it to an assistant principal or principal. This form can be placed in the school's designated drop off spot for anonymous reporting.

PLEASE PRINT

Your name (optional): _____

School: _____

Name(s) of student(s) accused of bullying and/or harassment: _____

Is this the first time you have been bullied or harassed? YES _____ NO _____
If NO, is the bullying by the same person(s) or a different person(s)? _____
Have any of these incidents been reported previously? No _____ Yes _____ To whom _____

Where did the incidents happen (choose all that apply)

- On school property At a school-sponsored activity or event off of school property On the computer
 On a school bus On the way to/from school At the bus stop Other: _____

On what dates did the incidents happen? _____

Choose the statement(s) that best describes what happened (choose all that apply)

- Teasing Threat Stalking Theft Cyberbullying
 Social exclusion Intimidation Physical violence Public humiliation Other: _____

What did the alleged offender(s) say or do? _____

Were there any witnesses (if yes, please list)? Yes _____ No _____ Witness names _____

Signature of student/employee completing this form (optional): _____ Date _____

Thank you. This report will be followed up in a prompt manner. By completing this form, you are verifying that your statements are true and exact to the best of your knowledge. If you fear a student is in IMMEDIATE danger, please contact a trusted adult right away!

For Office Use Only

Date Received:	
Received By:	