

**Sacred Heart School
Anti-Bullying Pledge**

BULLYING

Bullying is mean or hurtful behavior that keeps happening. Bullying is not safe, respectful, or kind and it is against Sacred Heart School rules. I am capable of Recognizing, Reporting, and Refusing bullying and pledge to be a powerful bystander to make a difference in my school.

I will not accept bullying at our school. My goal is to make Sacred Heart School a safe, caring, and respectful school.

I agree that it is everyone's responsibility to be a powerful bystander, by Recognizing, Reporting, and Refusing bullying. I can make a difference in our school.

I will:

- Treat others in the way that I want to be treated.
- Model Christian behavior in my words and actions.
- Find ways to help others join games and include others in group activities.
- Help other students to feel welcome and safe at our school.
- Accept others' differences.
- Stand up for students who are not being treated well by others.

Signed: _____

Date: _____

Sacred Heart School

Parent/Guardian Anti-Bullying Pledge

According to Washington State law, bullying is any negative action that is intentional, repeated, negative, shows a lack of empathy, and a power imbalance. This definition also applies to interaction between students, using electronic communication or social media.

As a parent at Sacred Heart School, I agree to join together with the Sacred Heart School community to uphold the school's behavioral policies and school rules, especially those related to bullying. Further, I agree to support my child(ren) in upholding their anti-bullying pledge.

By signing this pledge, I agree to:

- Keep myself and my child(ren) informed and aware of school bullying policies and behaviors that are considered bullying and harassment.
- Work in partnership with Sacred Heart School to encourage positive Christian behavior and conflict resolution in my child(ren) through my words and example.
- Be open to discussing negative behavior between my child and another child with the other student's parent in the interest of bringing resolution to a conflict or an end to bullying.
- Inform teacher/school counselor of changes in our child(ren)'s behavior or circumstances at home that may affect their behavior at school.

Child(ren)'s name(s): _____

Parent/Guardian's Signature(s):

Date _____