



HARASSMENT, INTIMIDATION, OR BULLYING (HIB) INCIDENT REPORTING FORM

PLEASE NOTE:

- 1) Complete, print, and return -or e-mail- this form to the Principal or any school staff.
- 2) To be considered HIB, an incident must meet the criteria as defined in District Policy and Procedure 3207.
- 3) All reports should be addressed appropriately and in a timely manner, however, please note that no disciplinary action will be taken against an alleged perpetrator based solely on anonymous reporting.
- 4) Reports should be submitted to the school as a first step for investigation.
- 5) Policy and Procedure 3207 – Harassment, Intimidation or Bullying can be found at:
<https://www.highlineschools.org/departments/student-support/bullying-civil-rights-sexual-harrassment>

Today's Date: _____ School: _____

Reporting Person: _____ Phone Number: _____

Email Address: _____ Interpreter needed? _____

Targeted Student: _____ Grade: _____

Name(s) of the alleged aggressor (if known): _____

List dates and times when incidents occurred (if known): _____

- | | | | | | |
|---|-------------------------------------|-----------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Hallway | <input type="checkbox"/> Library | <input type="checkbox"/> Lunchroom | <input type="checkbox"/> Locker Room | <input type="checkbox"/> Gym/Sport Field |
| <input type="checkbox"/> Parking Lot | <input type="checkbox"/> Playground | <input type="checkbox"/> Restroom | <input type="checkbox"/> School bus | <input type="checkbox"/> Social Media | <input type="checkbox"/> Electronic Device |
| <input type="checkbox"/> Off school property | | | <input type="checkbox"/> On the way to/from school | | <input type="checkbox"/> During a school activity |
| <input type="checkbox"/> Other (Please describe): _____ | | | | | |

Describe the incident, providing specific details (write on another piece of paper if you need more space):

Why do you think the harassment, intimidation or bullying occurred?

How is the targeted student feeling/affected by the incident and why?

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

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

Was the target absent from school as a result of the incident(s)? Yes No If yes, please explain.

Name of school adult you have contacted about this issue (if any) and what was the response?

What are your desired next steps, or how would you like the school to resolve this concern?

FOR BUILDING ADMINISTRATOR OR CENTRAL OFFICE USE ONLY (STOP HERE)

Form received by: _____ Date received: _____

Action taken:

Notified of Outcome of the Investigation:

Parent/guardian of Targeted Student: Verbally In writing Date: _____

Parent/guardian of Alleged harasser: Verbally In writing Date: _____

Sent copy of the form/other documents to the District Compliance Officer: Date: _____

HIB allegations were: Founded/Substantiated Unfounded/Unsubstantiated

Mark one: Resolved Unresolved Referred to: _____