

Regional School District 14 Incident Report Form

Potential Bullying, Cyberbullying, Sexual Harassment,
Discriminatory Harassment or other concerns

This form should be used for reporting any acts of physical violence/attack; taunting, teasing, name calling, put downs, racially or ethnically biased verbal remarks or threats and gender-based put downs; retaliation; threats, intimidation or hitting another; extortion or stealing money or possessions; exclusion or social isolation from the peer group. Reports may be filed with your child’s principal, school psychologist or school counselor/social worker.

Person Reporting the Incident: _____ Grade/School: _____
(reports may be made anonymously)

Date of the Incident/s: _____ Location of the incident/s: _____

Person/s Being Reported: _____

Victim/s of the Incident: _____

Witness/s of the Incident: _____

Describe the Incident/s:

Have there been any previous incidents or action taken?

Signature of Person Reporting the Incident: _____
(reports may be made anonymously)

Date report filed with Building Administrator: _____

Building Administrator Signature (of receipt): _____ Date: _____