Bullying, Harassment, or Intimidation Reporting Form

Bullying, harassment, and intimidation are serious acts and are subject to discipline at Charles A. Beard School Corporation. The following form should be used to report alleged bullying, harassment, or intimidation that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school, in the current school year. If you are a student victim, the parent/guardian of a student victim, a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged bullying, harassment or intimidation, complete this form and return it to the Principal at the student victim's home school. Contact the school for additional information or assistance at any time.

Bullying, harassment, or intimidation refers to intentional conduct, including verbal, physical, written, or an intentional electronic communication, that creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, performance, or physical or psychological well-being and is:

- motivated by an actual or a perceived personal characteristic including race, national origin, marital status, sex, sexual orientation, gender identity, religion, ancestry, physical attributes, socioeconomic status, familial status, or physical or mental ability or disability; or,
- threatening or seriously intimidating; and,
- occurs on school property, at a school activity or event, or on a school bus; or,
- substantially disrupts the orderly operation of a school.
- "Electronic communication" refers to communication transmitted by means of an electronic device, including a telephone, cellular phone, computer, or pager.

Person Reporting Incident: Name			
Telephone E-mail			
Place an ⊠ in the appropriate box:			
☐ Student ☐ Student (witness/bystander) ☐ Pare	ent/guardi	an Close adult relative Sc	hool staff member
1. Name of student victim		School	Age
2. Name(s) of alleged offender(s) (If known) (Please print)	Age	School (if known)	Is he/she a student?
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No
3. On what date(s) did the incident happen?/	onsored ac /from scho /hat happo ves physic nreatening	ctivity or event off school property ool* ened (choose all that apply): eal aggression g, in person or by other means Making rude and/or threatening g Intimidating (bullying), extorting,	estures or exploiting

6.	What did the alleged offender(s) say or do?
7.	Why did the bullying, harassment or intimidation occur?
8.	Did a physical injury result from this incident? Place an ⊠ next to one of the following: ☐ No ☐ Yes, but it did not require medical attention ☐ Yes, and it required medical attention
9.	If there was a physical injury, do you think there will be permanent effects? \square Yes \square No
10.	Was the student victim absent from school as a result of the incident? Yes No If yes, how many days was the student victim absent from school as a result of the incident?
11.	Did a psychological injury result from this incident? Place an ⊠ next to one of the following: ☐ No ☐ Yes, but psychological services have not been sought ☐ Yes, and psychological services have been sought
12.	Is there any additional information you would like to provide?

In order to use the E-Mail button above, you must download the PDF or email PDF to cabbullying@cabeard.k12.in.us

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