

Bullying, Harassment or Intimidation Reporting Form
Patchogue-Medford Schools

Directions: Bullying, harassment or intimidation are serious and will not be tolerated. This is a form 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 school. Contact the school for additional information or assistance at any time.

Bullying, harassment or intimidation means intentional conduct, including verbal, physical or written conduct or an intentional electronic communication that creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, or performance, or with a student's 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" means a communication transmitted by means of an electronic device, including a telephone, cellular phone, computer or pager.

Today's Date

School

Person Reporting Incident (First and Last Name)

Telephone #

E-mail address

Place an "x" in the appropriate box:

Student Student (witness/bystander) Parent/guardian Other Adult School staff member

Name of student victim (First and Last Name) Age

Name(s) of alleged offenders(s) (if known)	Age	School (if known)	Is he/she a student?	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

On what date(s) did the incident happen? Mo/Day/Yr Mo/Day/Yr Mo/Day/Yr

Where did the incident happen? (choose all that apply):

On school property At a school-sponsored activity or event off school property

On a school bus On the way to/from school

Place an "x" next to the statement(s) that best describes what happened (choose all that apply):

Any bullying, harassment or intimidation that involves physical aggression

Getting another person to hit or harm the student

Teasing, name-calling, making critical remarks, or threatening, in person or by other means

Demeaning and pointing inappropriate jokes towards victim

Excluding or rejecting the student

Making rude and/or threatening gestures

Spreading harmful rumors or gossip

Intimidating (bullying), extorting or exploiting

Electronic communications (specify)

Other (specify)

What did the alleged offender(s) say or do? (Attach a separate sheet if necessary)

Why did the bullying, harassment or intimidation occur? (Attach a separate sheet if necessary)

Did a physical injury result from this incident? Place an "x" next to one of the following:

No Yes, but it did not require medical attention Yes, and it required medical attention

If there was a physical injury, do you think there will be permanent effects? Yes No

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?

Did a psychological injury result from this incident? Place an "x" next to one of the following: No
 Yes, but psychological services have not been sought Yes, and psychological services have been sought

Is there any additional information you would like to provide? (Attach a separate sheet if necessary)

Signature

Date