The School District of Palm Beach County SB Policy-
5.002 Prohibiting Bullying and Harassment

Bullying/Harassment Anonymous 101 Incident Report – Drop Box

Accused Name(s) (last, first, initial)	School/ Worksite	Grade/Position	Telephone #/Contact Info.
Victim(s) Name(s) (last, first, initial)	School/Worksite	Grade/Position	Telephone #/Contact Info.
Name of Receiving Principal/Director and/or Supervisor (last, first, initial)	School/Worksite	Date	Telephone #/Contact Info.

When did the incident(s) take place? Date/Day:_____ Time:_____

Where did the incident/things happen?

Please describe in writing, **what** actually happened, include as much detail as possible.

Who witnessed the incident? Please provide as much information about the witnesses as possible.

List any form of **documentation and/or evidence** that you have which pertains to this case (e.g., written notes, emails, computer records, voice recordings or text messages/photos, referrals, incident reports, prior Referrals and/or EEO Complaints) Please attach any of this supporting documentation.

*SB Policy 5.002 describes **consequences** for **a student, employee and/or visitor** of a public K-12 educational institution who is found to have **wrongfully and intentionally accused** another of an act of bullying or harassment. The physical location or time access of a computer-related incident cannot be raised as a defense in any disciplinary action initiated.