## Harassment, Intimidation, and Bullying Incident Report Form

<u>Harassment/Bullying</u> is defined as a continuous pattern of intentional behavior, and includes but is not limited to written, electronic, verbal, physical acts, or gestures by an individual or group that is reasonably perceived to be <u>threatening</u> by the student-victim.

In an effort to minimize this type of behavior in the school environment, which includes on school property, at a school-sponsored event, on a school bus, or on an electronic device accessed on school property the Mercer School District has created a process whereby a student, parent, guardian, or bystander may report instances of harassment to the school officials for further review and investigation. Upon completion of this reporting form, please submit the form to Mr. Griffin. All reported incidents of harassment are investigated, and when necessary, the school staff apply appropriate disciplinary consequences.

## **Reporter Information**

Have you submitted a harassm	ent r	eport form previously			
Yes		No			
Have you contacted an adult re	gard	ing this issue?			
☐ Yes		No			
Reporter's Name:			(optional)		
You are:  Student School Staff You are: Victim Other (please Specify		Witness/Bystander			
If you would like someone to co	ontac	t you, please provide	your phone number:		
Incident Information:					
Date of Incident:		· · · · · · · · · · · · · · · · · · ·			
Time of Incident:					
Name of the victim:			<del></del>		
Name of the alleged aggressor:	:		<del></del>		
Are there any additional witnesses to the alleged event?					
☐ Yes		No [	☐ Unsure		
If yes, please provide names ar describe him/her/them.	nd gr	ade level information.	If you are not sure of the names, please		

Location of Incident:	
<ul> <li>School Campus</li> <li>School Event (specify event loacation)</li> <li>School Bus (specify bus):</li> <li>Electronic Device (possible screenshots to accompany this form</li> <li>Other (please specify)</li> </ul>	is helpful)
Type of Incident (please check all that apply):  Physical contact (shoving, hitting, spitting, kicking, etc.)  Teasing/name calling/demeaning jokes  Verbal intimidation  Inappropriate gesturing  Theft  Destruction of property  Sexual contact  Spreading rumors  Threats  Public humiliation/ridicule  Cyberbullying/cyberharassment/trolling  Other:	
This behavior is:  Related to student's perceived sexual orientation or gender idention.  Related to student's religious beliefs.  Related to student's racial or cultural background.  Related to student's disability.  Other:  None of the above descriptions apply to this situation.	ity
Please describe this incident and include as many details as possible (att screenshots, photos, letters, texts, etc.):	ach additional pages,
I certify that there is no falsification of the above information and events a best of my knowledge.	are accurately depicted to the
Signature of Reporter Date	<del></del>

All incidents reported will be investigated by school officials. The District will impose discipline per school policy. You will not be made aware of the disciplinary actions taken as these are protected under school privacy laws.

## For Office Use Only:

Date Submitted:			
Person Receivin	g Report:		
Investigated by:			
Position:		<del></del>	
Final report of in	vestigation of harassment complaint by		
•	aga	jainst	
	, all	leged offender	
In my/our invest	igation of the complaint, it is found (circle	appropriate response):	
• Found gro	unds to substantiate the allegations		
• Did not find	d grounds to substantiate the allegations		
• Did not find	d enough information to make a judgment	t on the allegations	
Summary of inve	estigation, findings, and disciplinary action	n:	
Victim Parent/Gu	uardian contacted?		
. Voo	Date:		
• Yes • No	Date:		
110			
Agressor Parent	/Guardian contacted		
• Yes	Date:		
• No	Date.		
Signature of Inve	estigator	Date	
Signature of Prir	ncipal (if not investigator)		

One week follow-up:		 
Two week follow up:		
One month follow up:	 	 
· <del></del>	 	 