



Cabot Schools Incident of Bullying Report Form



Bullying - the intentional harassment, intimidation, humiliation, ridicule, defamation, or threat or incitement of violence by a student against another student or public school employee by a written, verbal, electronic, or physical act that may address an attribute of the other student, public school employee, or person with whom the other student or public school employee is associated and that causes or creates actual or reasonably foreseeable: • Physical harm to a public school employee or student or damage to the public school employee's or student's property; • Substantial interference with a student's education or with a public school employee's role in education; • A hostile educational environment for one (1) or more students or public school employees due to the severity, persistence, or pervasiveness of the act; or • Substantial disruption of the orderly operation of the school or educational environment

Today's Date: _____ Person Reporting Incident: _____

Telephone: _____ Name of Student Victim: _____

School Victim Attends: _____ Grade: _____

Your Relationship to Victim: _____

Date of incident: _____ Time of incident: _____ Location of incident: _____

What did the alleged offender say or do (be specific and quote the words used):

Attach additional pages as needed...

Do you have any evidence you can give to show what happened? _____

Please list the first and last name of any witnesses: _____

Has the victim missed any school as a result of the incident? Yes No

Has this occurred before with this offender? Yes No

If you answered "yes" above, did you report it? Yes No

Who did you report it to? _____

I hereby certify that the information I have provided in this complaint is true, correct, and complete.

Signature

Date

Administrative Use Only

Received by: _____

Date: _____

Is this a credible report? Yes If no, explain: _____

If yes, follow the checklist below.

Report to parent, by end of next school day, that their student is a victim in a credible report of bullying
Date: _____ Time: _____ Method: _____

Investigate the credible report (up to 5 Days) Date Completed: _____

Notify parent of victim, within 5 days of completing the investigation, whether the credible report was true
Date: _____ Time: _____ Method: _____

Notify parent of victim of the availability of counseling and other intervention services

Notify parent of alleged offender, within 5 days of completing the investigation, that:
Date: _____ Time: _____ Method: _____

A credible report of bullying against their student exists

Whether the investigation found the credible report to be true

Whether action was taken against their student upon conclusion of investigation

o Action taken: _____

Potential consequences of continued incidents of bullying

Attach any additional documentation:

Witnesses statements

Any action taken as a result of the investigation (discipline notices)

Discuss, as appropriate, the availability of counseling and other intervention services with students who were involved