

Bullying and Harassment Incident Intake Form

NOTE: Please return completed form to CRSS Executive Director.

Date: _____

Name of person writing this report: _____

Check whether you are the: Target of the behavior Reporter (not the target)

Check whether you are a: Student Staff member (specify role): _____ Parent Administrator
 Other (specify): _____

Name of student bullied/harassed (target): _____

School: _____ Grade: _____

Name(s) of students exhibiting bullying behavior: _____

Description of incident(s) (answer who, what, where, when, how) (use back or another sheet if necessary):

Where did the incident happen? Check all that apply:

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Bus | <input type="checkbox"/> Internet/Social Media |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Locker Room |
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Restroom |
| <input type="checkbox"/> Gym | <input type="checkbox"/> School sponsored activity or event |
| <input type="checkbox"/> Hallway | <input type="checkbox"/> To/from school |
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Recess Area |
| <input type="checkbox"/> Other: _____ | |

Name(s) of witnesses (teachers, staff, other students): _____

Has this kind of incident happened to the target before? Yes No

If yes, how many times? _____ When? _____

Has this kind of incident happened to anyone else? Yes No

If yes, who? _____

Has this kind of incident happened involving bully behavior before? Yes No

Continued on back

Circle all behaviors that apply.

PHYSICAL CONDUCT -- Harm to another's body or property

- | | | | |
|------------------------------|---------------|----------------------------------|-----------------|
| -Threatening physical harm | -Scratching | -Biting | -Extortion |
| -Making threatening gestures | -Hair pulling | -Hitting | -Sexual assault |
| -Starting a fight | -Spitting | -Punching | -Arson |
| -Cornering or blocking | -Slapping | -Destroying or defacing property | -Homicide |
| -Pushing | -Kicking | -Theft | |
| -Pinching | -Tripping | -Assault with a weapon | |

EMOTIONAL CONDUCT -- Harm to another's self-worth

- | | | |
|--------------------------------|--|---|
| -Threatening to secure silence | -Taunting | -Harassing and/or frightening phone calls, emails, text or phone messages |
| -Challenging in public | -Racial, ethnic or religious slurs or epithets | -Unwanted sexually suggestive remarks, images or gestures |
| -Insulting gestures | -Insulting remarks | |
| -Dirty looks | -Defacing or falsifying schoolwork | |
| -Insulting remarks | -Insulting/degrading graffiti | |
| -Name Calling | | |

RELATIONAL CONDUCT -- Harm to another through damage (or threat of damage) to relationship or feelings of acceptance, friendship or group inclusion

- | | | |
|---|---------------------------------------|--------------------------------------|
| -Using negative body language or facial expressions | -Playing mean tricks | -Undermining other relationships |
| -Threatening to end a relationship | -Insulting publicly | -Passively not including in group |
| -Gossiping | -Ruining a reputation | -Exclusion |
| -Starting/spreading rumors | -Ignoring someone to punish or coerce | -Ostracizing / total group rejection |
| | | -Arranging public humiliation |

Describe any physical evidence that exists related to the incident (including physical marks, video/audio, printouts/screenshots of social media and other websites, emails, photos, text messages, etc.) Be advised that photos should be taken and printed off for all evidence contained on cellphones (i.e. text messages, photos, social media activity.): _____

****Where possible, please attach copies of all evidence information to this report. ****

This form is for reporting purposes only and not to be used to interview or interrogate an individual. Any and all information contained in this report is to remain confidential, and is not to be shared with any outside party. Anyone who wishes to make a report of bullying behavior may use this form as an initial step in the process. Other methods of reporting include contacting the Executive Director.

A student who intentionally makes a false claim, offers false statements, or refuses to cooperate with a CRSS investigation regarding bullying behavior shall be subject to appropriate disciplinary action.

The Cannon River STEM School prohibits retaliation (i.e. threats, rumor spreading, ostracism, assault, destruction of property, etc.) by a student or CRSS employee against any person who makes a report of bullying behavior in good faith, serves as a witness, or participates in an investigation.

Additional comments:

Signature of person making the report

Date

Form given to: _____ Position: _____ Date: _____