

Bully Reporting Form

Name of person being bullied:

Name of Bully:

Your Name (optional):

Type of Bullying (Circle all that apply):

1. Physical - Hitting / kicking / other physical aggression
2. Verbal - Teasing, name-calling, put-downs, or other behavior that would hurt others' feelings or make them feel bad.
3. Emotional/Exclusion - starting rumors, telling others not to be friends with someone, or other actions that would cause someone to be without friends.
4. Cyber-Bullying - Using electronic device mediums such as - but not limited to - computers, cell phones, and pagers to bully others through methods such as posting comments, statements, or pictures on blogs or websites, text-messaging, instant messages, or email.

Person/Student Concerned:

_____ Student

_____ Staff Person

_____ Friend

_____ Target

_____ Parent/Guardian

_____ Community Member

Description of events: (Please be specific - Location/Date/Time)

List other students/staff who witnessed the bullying...