**Rochester School District Harassment, Intimidation or Bullying (HIB) Incident Reporting Form**

**Reporting person** (optional)**:**

**Targeted student:**

**Your email address** (optional)**:**

**Your phone number** (optional)**: Today’s date:**

**Name of school adult you’ve already contacted** (if any):

**Name(s) of aggressor(s)** (if known)**:**

**On what dates did the incident(s) happen** (if known):

**Where did the incident happen?** Circle all that apply.

Classroom Hallway Restroom Playground Locker room Lunchroom/Cafeteria

Sport field Gym Parking lot School bus Online/Internet Cell phone

During a school activity Off school property On the way to/from school

Other (Please describe.)

**Please check the box that best describes what the bully did. Please choose all that apply.**

|  |  |  |
| --- | --- | --- |
| Blocked movement | Gestures (Explain) | Racial slur(s) |
| Damage to my property | Gossip | Repeated behavior |
| Derogatory comments | Intimidation directed at me | Sexual stories/jokes/pictures |
| Disrespectful comments | Name calling | Sexual Orientation Slurs |
| Electronic / Cyberbullying | Offensive writing or graffiti | Slurs, rumors, jokes |
| Excluding me from activities | Physical harm or threats of harm | Spreading rumors |
| Hazing (Club, team, class, other) | Pranks | Threats (to me, friends, school) |
| Gender slurs | Put downs | Touching / grabbing |

Other: (Please describe.)

**Why do *you* think this occurred?**

**Were there any witnesses? Yes No If yes, please provide their names:**

**Did a physical injury result from this incident? If yes, please describe.**

**Was the targeted student absent from school as a result of the incident? Yes No**

**If yes, please describe**

**Are there any notes, pictures, texts, screen shots or other evidence of the event(s) you are reporting?**

**Is there any additional information you can add?**

**Thank you for reporting!**

**----------------------------------------------------------------For Office Use---------------------------------------------------------------- Received by:**

**Date received:**

**Action taken:**

**Parent/guardian contacted:**

**Circle one: Resolved Unresolved**

**Referred to:**