

BULLYING INCIDENT REPORTING FORM

Name of Person Filing Report:

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_____ (Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)

Information about the Incident:

Name of Target: _____

Name of Aggressor: _____

Date of Incident(s): _____

Location of Incident(s): _____

Witnesses (List the names of people who saw the incident or have information about it.)

Name: _____

Name: _____

Name: _____

Description: (Describe the details of the incident, including the names of the people involved, what occurred, and what each person did and said, including specific words used. Use additional space on the back if necessary.)

Name of Person Receiving this Report: _____

Date: _____ **Report Given to:** _____

The Phoenix School, 89 Margin St., Salem, MA 01970