

## SALISBURY CHRISTIAN SCHOOL HARASSMENT OR INTIMIDATION (BULLYING) REPORTING FORM

Directions: Harassment and intimidation (bullying) are serious and will not be tolerated. This is a form to report alleged harassment and intimidation (bullying) that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school, in the current school year. If you are a student victim, the parent/guardian of a student victim, or a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged harassment or intimidation (bullying), complete this form and return it to a Salisbury Christian School administrator. Contact the school for additional information or assistance at any time.

**Harassment and intimidation (bullying) means conduct, including verbal conduct, that creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, or performance, or with a student's physical or psychological well-being, and is motivated by an actual or a perceived personal characteristic, or is threatening or seriously intimidating.**

Today's date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

<b>PERSON REPORTING INCIDENT</b>	Name: _____
Telephone: _____	E-mail: _____
Place an <b>X</b> in the appropriate box: <input type="checkbox"/> Student <input type="checkbox"/> Parent/guardian <input type="checkbox"/> Close adult relative <input type="checkbox"/> School Staff	

1. Name of student victim: \_\_\_\_\_ Age: \_\_\_\_\_  
(Please print)

2. Name(s) of alleged offender(s) (If known): (Please print)	Age	School (if known)	Is he/she a current SCS student?
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident happen?:  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year    Month Day Year    Month Day Year

4. Where did the incident happen (choose all that apply)?

On school property     At a school-sponsored activity or event off school property  
 On a school bus     On the way to/from school

5. Place an **X** next to the statement(s) that best describes what happened (choose all that apply):

Hitting, kicking, shoving, spitting, hair pulling, or throwing something  
 Getting another person to hit or harm the student  
 Teasing, name-calling, making critical remarks, or threatening, in person or by other means  
 Demeaning and making the victim of jokes  
 Making rude and/or threatening gestures  
 Excluding or rejecting the student  
 Intimidating (bullying), extorting, or exploiting  
 Spreading harmful rumors or gossip  
 Other (specify) \_\_\_\_\_

This form is to be confidentially maintained.

6. What did the alleged offender(s) say or do? \_\_\_\_\_

---

---

---

---

(Attach a separate sheet if necessary)

7. Why did the harassment or intimidation (bullying) occur? \_\_\_\_\_

---

---

---

(Attach a separate sheet if necessary)

8. Did a physical injury result from this incident? Place an **X** next to one of the following:

- No       Yes, but it did not require medical attention       Yes, and it required medical attention

9. If there was a physical injury, do you think there will be permanent effects?  Yes  No

10. Was the student victim absent from school as a result of the incident?  Yes  No  
If yes, how many days was the student victim absent from school as a result of the incident? \_\_\_\_\_

11. Did a psychological injury result from this incident? Place an **X** next to one of the following:

- No       Yes, but psychological services have not been sought       Yes, and psychological services have been sought

12. Is there any additional information you would like to provide? \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

(Attach a separate sheet if necessary)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_