

WORCESTER PUBLIC SCHOOLS

BULLYING PREVENTION AND INTERVENTION INCIDENT REPORTING FORM

1. Name of Reporter/Person Filing the Report: _____
(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)

2. Check whether you are the: [] Target of the behavior [] Reporter (not the target)

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

Your contact information/telephone number: _____

4. If student, state your school: _____ Grade: _____

5. If staff member, state your school or work site: _____

6. Information about the Incident:

Name of Target (of behavior) (Victim): _____

Name of Aggressor (person who engaged in the behavior) (Bully): _____

Date(s) of Incident(s): _____

Time When Incident(s) Occurred: _____

Location of Incident(s) (be as specific as possible): _____

7. Witnesses (List people who saw the incident or have information about it):

Name: _____ [] Student [] Staff [] Other _____

Name: _____ [] Student [] Staff [] Other _____

Name: _____ [] Student [] Staff [] Other _____

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

[Empty box for incident details]

9. [] Check box if the target has been harassed due to membership in a protected class such as (mark as appropriate):
[] Race/color [] Religion [] Gender [] Gender Identity
[] National origin [] Disability [] Sexual orientation [] Citizenship status

If the box is checked, please identify the protected class, report to the School Safety Director and follow protocols for response.

10. Signature of person filing this report: _____ Date: _____
(Note: Reports may be filled anonymously)

11. Form given to: _____ Position: _____ Date: _____

*** FOR ADMINISTRATIVE USE ONLY ***

Completed forms may be submitted to your school's office or mailed/faxed to the School Safety Office at School Safety Office, Worcester Public Schools, 20 Irving Street, Room 101, Worcester, MA 01609, or faxed to 508-799-3173.

Call or Email the School Safety Office with any questions regarding the bullying reporting procedure at 508-799-3472 or reportbullying@worcesterschools.net.

Visit http://worcesterschools.org/bullying-prevention to obtain copies of this form and obtain additional information and resources.