

PVUSD
GRADES 9-12 BULLYING / HARASSMENT / THREAT / INTIMIDATION
REPORTING FORM

For reporting alleged bullying, harassment, threat, or intimidation occurring on campus, at school events, or on the way to/from school

Directions: Complete this form to report alleged bullying/harassment/threat/intimidation occurring on school property, at a school-sponsored activity off campus, on a school bus, or on the way to/from school during the current school year. Return completed form to the principal.

Harassment/threat/intimidation or bullying: conduct (including electronic acts) that creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, performance, or physical/psychological well-being, motivated by an actual or perceived personal characteristic (race, national origin, marital status, sex, sexual orientation, gender identity, religion, disability), or that is threatening/seriously intimidating. (Education Code 32261)

STUDENT / REPORTER INFORMATION

Today's Date:	School:		
Student's Name:	Age:	Gender:	Grade:
Phone Number:			

ALLEGED OFFENDER(S)

Name(s) of Alleged Offender(s)	Age	School (if known)	Student at this school?
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No
			☐ Yes ☐ No

INCIDENT DETAILS

Date(s) incident occurred:

Where did it happen (check all that apply):

☐ On campus ☐ School bus ☐ To/from school ☐ School-sponsored activity/event off campus

Check statement(s) that best describe what happened (check all that apply):

☐ Verbal/written threat ☐ Physical contact ☐ Rude/threatening gestures ☐ Cyberbullying/electronic
☐ Rumors/exclusion ☐ Property damage/theft ☐ Other (specify): _____

Physical injury resulted? ☐ Yes ☐ No

Absent from school due to incident? ☐ Yes (____ days) ☐ No

What did the alleged offender(s) say or do?

Why did the incident occur?

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Were others involved with the alleged bullying/harassment/threat/intimidation?

List any witnesses:

What was your reaction to the incident?

Describe any subsequent incidents:

Additional information you would like to provide:

SIGNATURES

Signature

Date

Received by / Title

Date