

Bullying Incident Report Form (Non-Staff)

Date Filed: _____

Person Filing the Report

Name: _____

Address: _____

Phone Number: _____ Email: _____

Relationship to the student being bullied (parent/guardian, fellow student, community member, etc.):

_____: I prefer to remain Anonymous.

(The district will investigate all allegations of bullying, but it is more difficult to follow up on anonymous reports.)

Bullying frequently involves repeated behavior. If you have witnessed or have knowledge of more than one incident, please provide information on all incidents. Please feel free to use multiple forms or attach additional pages if necessary to report all related incidents.

Did you witness this incident? Yes No

If No, provide the specific information as to how you found out about this incident:

Details of the Incident

1. **Date and Time** the incident took place: Date _____ Time _____
(If exact date/time are uncertain, provide approximate date/time)
2. **Where** did the incident take place? _____
(Be as specific as possible. For example, instead of "the high school," specify "the men's bathroom in the main hallway next to the business hall")
3. Please provide as much of the following information as possible for each student who was **the target of bullying**:

| | | |
|--------------------------|-------------|----------------------|
| Name of targeted student | Grade level | School of attendance |
|--------------------------|-------------|----------------------|

| | | |
|--------------------------|-------------|----------------------|
| Name of targeted student | Grade level | School of attendance |
|--------------------------|-------------|----------------------|

| | | |
|--------------------------|-------------|----------------------|
| Name of targeted student | Grade level | School of attendance |
|--------------------------|-------------|----------------------|

7. Is there any **other information** you believe is relevant for the district to know when investigating this incident?

This report should be accompanied by any applicable evidence that bullying occurred, such as copies of notes, e-mails, photos, etc. If the evidence includes evidence of sexting, nudity, or inappropriate pictures of a minor, DO NOT copy, download or further distribute the images. Instead, show the evidence to the principal immediately so appropriate action can be taken.

A copy of this form can be submitted to the relevant building for affected students at the contact information listed below. You may also provide information via phone at the numbers provided:

South Iron Elementary Principal:
Mrs. Cristie Ayers
Email: cayers@sipanthers.k12.mo.us
Phone: (573) 598-4241 x3
Fax: (573) 598-1163
Address: 210 School Street, Annapolis, MO 63620

South Iron High School Principal:
Mr. Lawrence Graves
Email: lgraves@sipanthers.k12.mo.us
Phone: (573) 598-4241 x4
Fax: (573) 598-4210
Address: 210 School Street, Annapolis, MO 63620

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| Once received, this form will be forwarded to the appropriate staff member for further action. |
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FOR SCHOOL USE ONLY
DO NOT WRITE BELOW THIS LINE

Date Received by Administration: _____

Investigative Action Taken:

Outcome of Investigation:

Substantiated

Not Substantiated

Outcome Notes:

Administrator Signature

Date