Livingston Public Schools Report of Harassment, Intimidation or Bullying

Harassment, intimidation and bullying consist of words or actions that harm or threaten another person's body, property, self-esteem or group acceptance. This includes any form of sexual harassment.

Harassment, intimidation and bullying are serious offences and will not be tolerated. This is a form to report alleged harassment and bullying that occurred on school property; at a school-sponsored activity or event off school property; or on a school bus. If you are a student victim, the parent/guardian of a student victim, or a close adult relative of a student victim, and wish to report an incident of alleged harassment or bullying, complete this form and return it to the Principal at the student victim's school. Contact the school for additional information or assistance at any time.

| Today's date: | Date of Incident: |
|--|-----------------------------------|
| Person reporting incident: | |
| Address: | |
| Home Telephone: | Cell Phone: |
| Place an X in the appropriate box: Student/Witne | ess DParent/Guardian DOther Adult |
| Name of student victim: | Age: School: |

Information on the alleged offender(s) (If known):

| Name | Age | School |
|------|-----|--------|
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Where did the incident occur: (choose all that apply)?

□On school property □At a school-sponsored activity or event off school property □On a school bus □Online

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

Unsolicited or inappropriate physical contact including that of a sexual nature

□ Other (specify)

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Please attach a separate sheet if necessary for any of these questions.

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

Where did the harassment/bullying occur?

For how long has the harassment/bullying been occurring?

| Did a physical injury result from this/these incident(s)? \Box No \Box Ye | es |
|---|----|
| If yes, what were the injuries that required medical treatment? | |
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| | |
| Signature:Date: | |
| | |

PLEASE RETURN THIS COMPLETED FORM TO THE PRINCIPAL'S OFFICE

cc: Affirmative Action Officer