

## FNCD-E STUDENT BULLYING PREVENTION AND INTERVENTION REPORT FORM

The Board of Education expressly prohibits any form of bullying behavior by students at school as well as active or passive support for acts of bullying. In addition, the Board of Education prohibits bullying behavior by students that does not occur at school but which causes a substantial and material disruption at school or an interference with rights of students and personnel to be secure.

### An person may report an issue of bullying or harassment

Today's Date: \_\_\_\_\_

School Site: \_\_\_\_\_

#### Person Reporting Incident (Optional)

☐ By checking this box, the person reporting the incident indicates that they wish to remain anonymous

**If choosing NOT to remain anonymous, the person reporting is asked to fill in the information below.**

Name: \_\_\_\_\_ Relationship to victim: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

1. Name of Student Victim: _____	Grade: _____	Gender: _____	Race: _____
Name(s) of alleged offender(s): _____	Grade: _____	Gender: _____	Race: _____
Name(s) of alleged offender(s): _____	Grade: _____	Gender: _____	Race: _____
Name(s) of alleged offender(s): _____	Grade: _____	Gender: _____	Race: _____
Date and time of incident(s): _____			
Location of Incident(s): _____			

List all witnesses including students, faculty and / or staff. If witnesses are NOT students, please include contact information where possible:

Witness: _____	Contact info: _____
Witness: _____	Contact info: _____
Witness: _____	Contact info: _____

2. Describe in detail the actions or behaviors that you interpret as intentional acts of bullying or harassment. The list may include but not be limited to: Online/Social Network bullying, physical acts, social isolation or exclusion, physical threats or acts of violence, intimidation, name calling, rumors or slander, taking another person's property.

Check the box next to each of the following that apply to this incident:

3. Do you have copies of online bullying, social network pages or written threats?

☐ No

☐ Yes

☐ Copies are attached to this report

4. Did physical injury result from this incident?

☐ No

☐ Yes

☐ Medical attention was required

5. Was the student victim absent from school as a result of this incident?

☐ No

☐ Yes

Number of days? \_\_\_\_\_

6. Do you have any other physical evidence of the incident that could assist school officials in the investigation of this incident?

☐ Written Notes

☐ Emails

☐ Property Destruction

☐ Recordings

☐ Other \_\_\_\_\_

7. Has a complaint relevant to this incident been filed before?

☐ No

☐ Yes

If yes, complete the section below:

Where: \_\_\_\_\_

With Whom: \_\_\_\_\_

When: \_\_\_\_\_

8. Has a formal police report been filed with a school resource office, Sand Springs Police, or the Tulsa County Sheriff's office?

☐ No

☐ Yes

If yes, please provide the Police Report Number: \_\_\_\_\_

**NOTE: If the bullying/harassment include physical assault and battery or sexual battery, threats to kill, or threats that include a weapon, then the Sand Springs Public Schools Resource Officer must be notified for preparation of a formal police report.**

**Any person who knowingly makes false accusations against another person will be appropriately disciplined pursuant to district policy. Any accusations confirmed to be false will be removed from the accused student's file. Retaliation is expressly prohibited against any person who participates in reporting, investigating or addressing any incident of student bullying behavior.**

**SAND SPRINGS PUBLIC SCHOOLS**