

**Prescott School District No. 402-37
Harassment, Intimidation or Bullying (HIB)
Incident Reporting Form**

Reporting person (optional): _____

Impacted individual(s): _____

Your email address (optional): _____

Your phone number (optional): _____

Name of school adult you've already contacted (if any): _____

Allegation(s):

Names of those involved:

On what dates did the incident(s) happen (if known):

Where did the incident happen?

Please describe what happened.

Why do you think the alleged harassment, intimidation or bullying occurred?

Were there any witnesses? Yes_____ No_____ If yes, please provide their names:

Did a physical injury result from this incident? If yes, please describe.

Was the individual absent from school/work as a result of the incident? Yes_____ No_____
If yes, please describe

Is there any additional information you would like to share?