

### Bullying Complaint Report Form

Date: \_\_\_\_\_ Grade: \_\_\_\_\_

Name(s) of Person filing report: \_\_\_\_\_

Name of person(s) being bullied if known: \_\_\_\_\_

Name of person(s) who is bullying: \_\_\_\_\_

Date and approximate time of incident: \_\_\_\_\_

Location of incident: \_\_\_\_\_

Description of incident: Specific details, background to the incident, and any attempts that you have made to resolve the incident.

(Include names of those involved and specific details: what, when, where, how, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate other individuals who could provide more information regarding this complaint including witnesses or participants:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Indicate in your opinion how this problem might be resolved. Please be as specific as possible.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Outcome of incident: \_\_\_\_\_

I certify that the above information is correct and that the events are accurately depicted to the best of my knowledge.

\_\_\_\_\_  
Name of Complainant

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Date

*Please return this form to school administration*