

BULLYING and/or HARASSMENT PRELIMINARY REVIEW

Date: _____ School: _____

Name of alleged victim: _____ Age: ____ Grade: ____

Alleged victim's complaint:

Name(s) of alleged bully(s): _____ Age: ____ Grade: ____

Alleged bully's perception:

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

- ☐ Teasing ☐ Threat ☐ Stalking ☐ Theft ☐ Cyber bullying
☐ Social exclusion ☐ Intimidation ☐ Physical violence ☐ Public humiliation ☐ Other _____

Does it appear that the behavior was intended or that a reasonable person would know it would likely harm 1 or more pupils either directly or indirectly by doing any of the following:

- Substantially interfere with educational opportunities, benefits, or programs of 1 or more pupils.
- Adversely affect the ability of a pupil to participate in or benefit from the school district's or public school's educational programs or activities by placing the pupil in reasonable fear of physical harm or by causing substantial emotional distress. ☐ Yes ☐ No
- Have an actual and substantial detrimental effect on a pupil's physical or mental health.
- Cause substantial disruption in, or substantial interference with, the orderly operation of the school.?

Place an X next to the statement(s) that best describes where the incident occurred (choose all that apply):

- ☐ On school property ☐ At a school-sponsored activity or event off school property ☐ At bus stop
☐ On a school bus ☐ On the way to/from school ☐ Electronically

Did the incident happen in any of these areas? ☐ Yes ☐ NoIf you answered **YES** to both of the above questions, then complete the determination and investigation form.

Date		If no , and was a criminal act, refer to law enforcement.
Date		If no , and not a criminal act, inform parents/legal guardians.

Were any additional actions taken?

Signature: _____ Date: _____

Remember: If you suspect that bullying or harassment is occurring then be sure to complete the determination and investigation form.