



THE SCHOOL BOARD OF BREVARD COUNTY, FLORIDA STUDENT REPORTING FORM

DIRECTIONS: A student may file a complaint of bullying, harassment, sexual harassment or teen dating violence and abuse with a school official or by placing this form in the identified school's drop off spot for anonymous reporting. The confidentiality of this form will be maintained in accordance with the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. § 1232g., Florida law, and/or as required by the 2020 Office of Civil Rights Title IX regulations.

Today's Date: _____ School: _____

Your Name: _____ Date of Birth: _____

Contact Phone # _____ Contact Email: _____

Who is bothering you? _____

Nature of Complaint (tell what happened): Choose all that apply and describe the exact words or behaviors used under "Other"

- Teasing
- Hitting or kicking
- Gender Discrimination
- Gossip/rumors being spread
- Name calling
- Sexual Harassment
- Shoving or pushing
- Being left out on purpose
- Relationship/Dating Violence
- E-mail, text, social media (print all messages and attach)
- Sexual Assault
- COVID-19 Harassment
- Other (please specify) _____

Describe what happened. Attach a separate sheet, if necessary. _____

When did this happen? Date(s): _____

Where did this happen? Choose all that apply.

- Classroom
- Restroom
- Playground
- School bus
- Hallway
- Cafeteria
- School bus stop
- At a school related or sponsored event
- Other school location (please specify) _____
- Off Campus/Other Location (please specify) _____

How many times has this happened before?

Have you reported this problem to your teacher, principal, or other school staff before?

- Yes No

If yes, to whom was it reported and what occurred in the past? Attach a separate sheet, if necessary.

What actions have you attempted to try to stop his/her behavior? Please list

Is there anyone who witnessed this behavior? _____

Do you have any documentation, pictures, texts, etc., to support your complaint?

Yes No – If yes, attach to this form

How has this behavior affected you?

What would you like us to do to help?

I certify that, to the best of my knowledge and belief, that the information provided by me on this form is “true and correct” and not a “false statement or charge” to the best of my knowledge. Providing false information may lead to discipline pursuant to federal and state law and/or regulations.

Student Signature

____/____/____
Date

FOR ADMINISTRATOR USE ONLY

Date Received: _____

Received By: _____

Administrative Findings:

Bullying/Harassment Investigation

Title IX Investigation

Disciplinary Investigation

Other (i.e., referred to law enforcement)

Beginning with the 2018-2019 school year, a student enrolled in a Florida public school in **kindergarten through grade 12** who has been subjected to an incident of battery; harassment; hazing; bullying; kidnapping; physical attack; robbery; sexual offenses, harassment, assault, or battery; threat or intimidation; or fighting at school is afforded the opportunity to transfer to another public school with capacity or enroll in an approved private school under the Hope Scholarship. (Section §1002.40, Florida Statutes)

If you think that you are in danger, please contact a trusted adult right away.