Conflict, Bullying, Harassment, or Intimidation Reporting Form

Confidential

Bullying and harassment can take many forms. It is unwanted behavior that interferes with your life. It limits and denies the rights of students to study, work, and play in the school setting. Everyone has the right to not be bullied or harassed and the staff at the School District of Mondovi feels strongly that all students should feel safe at school.

Bullying: A deliberate or intentional behavior using words or actions, intended to cause fear, intimidation, or harm. Bullying may be a repeated behavior and involves an imbalance of power. It is serious enough to negatively impact the individual's well-being.

Harassment: A deliberate or intentional behavior toward an individual or group of individuals based in whole or in part on their sex, race color, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional, or learning disability which creates an intimidating, hostile, or offensive environment.

Conflict: When two or more students disagree and both parties are contributing to the problem. As students grow and form relationships, conflicts may naturally arise. While a person's feelings may be hurt, conflict may not be bullying.

(ADULT COMPLETES FORM WITH STUDENT & PLEASE WRITE LEGIBLY)

*Denotes Required Line

1. Staff Member: _____ Date: _____ Time: _____
2. Person Reporting the Incident: _____
3. *Name of Alleged Target: _____
4. *Name(s) of Alleged Bully: _____
5. Name(s) of Witnesses: _____
6. *Has this happened to you or anyone else before? YES NO

   If YES, is this bullying incident by the same person(s): YES NO

   Were any of the previous incidents reported? YES NO

   If YES, to whom? _____
7. *Where did the incident occur? (choose all that apply):

   ☐ On school property ☐ At a school sponsored event ☐ On the bus ☐ Social Media/Internet

   ☐ At the bus stop ☐ On the way to/from school ☐ Other: _____
8. *What date(s) did the incident occur? _____

9. *Describe the incident(s), including what the alleged offender(s) said or did (add attachment if necessary):

_____

_____

_____

_____

_____

_____

_____

_____

Student Signature _____ Date _____

10. Was the Counselor contacted? YES NO

If YES, Counselor's Notes:

_____

_____

_____

_____

_____

Signature _____ Date _____

11. Referred to Administration? YES NO

If YES, Administrator's Notes:

_____

_____

_____

_____

_____

Signature _____ Date _____

12. Parent Communication Made (within 24 hours of the report):

☐ Text/Apptegy ☐ Email ☐ Phone ☐ In-Person Meeting

Date: _____ Time: _____ Signature: _____