Bullying Anonymous Reporting Form  
*(For Students Only)*

If you have information regarding bullying and would like to report this information anonymously, please fill out the following form to the best of your knowledge. Please note that this form is completely anonymous.  
*(For the purpose of this form, bullying includes bullying, harassment, and discrimination.)*

<table>
<thead>
<tr>
<th>VICTIM NAME (first and last name if possible)</th>
<th>GRADE</th>
<th>Today’s Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCUSED NAME (first and last name if possible)</td>
<td>GRADE</td>
<td></td>
</tr>
</tbody>
</table>

Where did the incident occur?  
____________________________________________________________________________________

When did the incident occur?  
Date: ________________________  
Time: ________________

Please describe, in as much detail as possible, what happened.  
____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Do you know any of the witnesses involved? If so, please provide identifying information.  
____________________________________________________________________________________

____________________________________________________________________________________

Thank you, we will follow up with you. If you fear a student is in IMMEDIATE danger, contact the school Principal, Social Worker, Counselor or Nurse. If it is after school hours, call 911.