



**HARASSMENT, INTIMIDATION, AND BULLYING (HIB)  
INCIDENT REPORTING FORM**

(For Student Issues)

Items denoted with a red asterisk \* are required.

1. Today's date: \_\_\_\_\_
2. \*School building: \_\_\_\_\_
3. Reporting person: \_\_\_\_\_
4. Your relation to the district:  Student  Parent or Guardian  District Employee  Anonymous
5. Your email address: \_\_\_\_\_
6. Your phone number: \_\_\_\_\_
7. Name of school adult you've already contacted (if any): \_\_\_\_\_
8. \*Targeted student: \_\_\_\_\_
9. Name(s) of aggressors (if known): \_\_\_\_\_
10. On what days did the incident happen (if known): \_\_\_\_\_
11. Where did the incident happen (e.g. classroom, playground, internet, school bus)? Please list all areas:  
\_\_\_\_\_
12. Please describe what the aggressor did (e.g. hitting, teasing, threatening, exploiting, etc.):  
\_\_\_\_\_  
\_\_\_\_\_
13. Why do you think the harassment, intimidation or bullying occurred?  
\_\_\_\_\_  
\_\_\_\_\_
14. Please name any witnesses (leave blank if no witnesses):  
\_\_\_\_\_
15. Please describe any physical injury that occurred as a result of this incident (leave blank if no physical injuries occurred):  
\_\_\_\_\_  
\_\_\_\_\_
16. If the target was absent from school as a result of the incident, please describe (leave blank if not absent):  
\_\_\_\_\_  
\_\_\_\_\_
17. Is there any additional information?  
\_\_\_\_\_  
\_\_\_\_\_

<b><i>For Office Use Only</i></b>	
Received by: _____	Date received: _____