



Bullying, Harassment, or Intimidation Reporting Form

Woodstock Academy

57 Academy Road

Woodstock, CT 06281

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bullyingreport@woodstockacademy.org

This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g.

Directions: Bullying, harassment, and intimidation are serious and will not be tolerated. This is a form to report alleged harassment and intimidation (bullying) that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school*, in the current school year. If you are a student victim, the parent/guardian of a student victim, a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged bullying, harassment or intimidation, complete this form and return it to the Dean of Students at Woodstock Academy. Contact the school for additional information or assistance at any time.

Bullying-Effective 2008, the definition of “bullying” means any overt acts by a student or a group of students directed against another student with the intent to ridicule, harass, humiliate or intimidate the other student while on school grounds, at a school-sponsored activity or on a school bus where acts are repeated more than once against any student during the school year. Such bullying policies may include provisions addressing bullying outside of the school setting if it has a direct and negative impact on a student’s academic performance or safety in school.

Today’s date: ___/___/___

School: _____

Person Reporting Incident (optional): Name _____

Telephone (____) - _____ - _____ E-mail _____

Place an in the appropriate box: Faculty/Staff Student Parent/guardian Family Member

1. Name of student victim _____ Age _____
(Please print)

2. Name(s) of alleged offender(s) (If known) <i>(Please print)</i>	Age	School (if known)	Is he/she a student?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident happen? ___/___/___ ___/___/___ ___/___/___
Mo. Day Year Mo. Day Year Mo. Day Year

4. Where did the incident happen (choose all that apply)?

- On school property At a school-sponsored activity or event off school property Cyber-bullying*
- On a school bus On the way to/from school* Outside of School*

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

- Hitting, kicking, shoving, spitting, hair pulling, or throwing something
- Getting another person to hit or harm the student
- Teasing, name-calling, making critical remarks, or threatening, in person or by other means
- Demeaning and making the victim of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting

- Spreading harmful rumors or gossip
- Other (specify) _____

6. What did the alleged offender(s) say or do? _____

 _____ (Attach a separate sheet if necessary)

7. Why did the harassment or intimidation (bullying) occur? _____

 _____ (Attach a separate sheet if necessary)

8. List witness(s) that were present: _____

9. How did you learn about the bullying? _____

10. Did a physical injury result from this incident? Place an next to one of the following:
 No Yes, but it did not require medical attention Yes, and it required medical attention

11. If there was a physical injury, do you think there will be permanent effects? Yes No

12. Was the student victim absent from school as a result of the incident? Yes No
 If yes, how many days was the student victim absent from school as a result of the incident? _____

13. Did a psychological injury result from this incident? Place an next to one of the following:
 No Yes, but psychological services have not been sought Yes, and psychological services have been sought

14. Is there any additional information you would like to provide?

 _____ (Attach a separate sheet if necessary)

I hereby certify that the information I have provided in this complaint is true, and correct and complete to the best of my knowledge.

Signature

_____/_____/_____
Date

(Optional) Student Signature

_____/_____/_____
Date

Received by

_____/_____/_____
Date

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 *All incidences will be investigated, but not every incident will result in school discipline.