



Bully Behavior Report

Ed Code 48900

This form may be used by any student or adult to report 'mistreatment by others'. This may include alleged bullying, harassment, discrimination, injury or cyber related incidents.

REPORTING PERSON (First and Last Name)

IF STUDENT, ID# & Grade:

CONTACT INFORMATION (Home Phone/Cell/Email/Homeroom Teacher)

DO YOU WANT TO REMAIN ANONYMOUS? _____ YES _____ NO

TODAY'S DATE: _____ INCIDENT DATE: _____

I am (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> The person who was bullied | <input type="checkbox"/> The person who bullied |
| <input type="checkbox"/> The person who participated in bullying | <input type="checkbox"/> A witness |
| <input type="checkbox"/> A parent/caregiver | <input type="checkbox"/> A student |
| <input type="checkbox"/> Staff | <input type="checkbox"/> A community member |

DID YOU REPORT THE BULLYING BEHAVIOR? _____ YES _____ NO

IF YES, TO WHOM? _____ WHEN? _____
PERSON(S) YOUR COMPLAINT INVOLVES (if known):

Were there any witnesses? _____ YES _____ NO If yes, list their name(s):

WHERE DID THE BULLY BEHAVIOR HAPPEN? Circle location:

Classroom	Hallway	Restroom	Gym	Locker room	Lunchroom	Field
School bus	Internet	Cell phone	Outside	Another campus	To/from school	Other

Please check the box that best describes what the accused did. Please choose all that apply.

- Physical: Hitting, kicking, shoving, spitting, etc.
- Getting another person to hit or harm the student
- Teasing, name calling, put downs, criticizing, jokes
- Property issues. (hiding, damaging, taking)
- Threatening in person, by phone, by e-mail, etc.
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Spreading harmful rumors or gossip
- Demanding money/homework/etc.
- Other



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Describe what happened. Use all exact language and as much detail as possible.
If I were watching it on a video, what exactly would I see?

Revised 08/03/17

SBCUSD BULLY BEHAVIOR REPORT

I agree that all of the information on this form is accurate to the best of my knowledge.

Signature of complainant

Date

Signature of school official receiving Bully Behavior Report

Date

***Please submit this form to the school principal. If you need assistance in completing this form, please contact the school principal. Complaints will be investigated and resolved within 15 school days of receipt of this complaint form.*



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INCIDENT/WITNESS STATEMENT

Sworn Declaration of: _____ Grade: _____ DOB: _____ ID: _____

Date of Incident: _____ Time: _____ School: _____

Location: _____ Other Witnesses: Yes No

IMPORTANT – PLEASE READ

- **State the facts only!**
- **A description of an incident should clearly state only what you saw or heard**
- **Clearly identify any person that may have been involved in this incident (Use names instead of pronouns such as he, she, they, them, etc.).**
- **Describe in sequence the course of events that took place with as much detail as possible.**
- **Perjury (lying) is a criminal offense.**

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge on date:

_____ day of _____, 20 _____.

Declarant Signature: _____