Shoreline School District
Harassment, Intimidation and Bullying/Cyber Bullying Reporting Form

Directions: Please complete this form and return it to the School Administrator. Please note that no disciplinary action can be taken against an alleged aggressor based solely on anonymous reporting.

Aggressor(s):
Targeted Students(s):
Reporting Person (optional):
Your email address (optional):
Your phone number (optional):
Name of school adult you have already contacted (if any):
On what date(s) did the incident(s) occur (if known)?
Date this form was submitted:

Where did the incident(s) occur? Check all the apply:

- Classroom
- Locker Room
- School Bus
- During School Activity
- Hallway
- Sport(s) Field
- Internet
- Off School Property
- Restroom
- Playground
- Cell Phone
- Lunchroom/SAC
- Parking Lot
- To/From School
- Other (please describe):

Please check the box that best describes what the aggressor did. Check all that apply:

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
- Getting another person to hit or harm the student
- Teasing, name calling, making critical or threatening remarks (in person, by phone, via email, etc.)
- Putting the student down and making the student a target of jokes
- Making rude and/or threatening gestures
- Spreading harmful rumors or gossip
- Cyber bullying (calling, texting, email, social media, etc.)
- Other (please describe)

Why do you think that the harassment/intimidation/bullying occurred?

Were there any witnesses? □ Yes □ No
If yes, please provide names: __________________________________________________________

Did physical injury result from this incident? □ Yes □ No
If yes, please describe: ______________________________________________________________

Was the target absent from the school as a result of this incident? □ Yes □ No
If yes, please describe: ______________________________________________________________

Is there any additional information?

Thank you for reporting