

Crookston Public Schools
Bullying and Harassment Incident Intake Form

NOTE: Please return completed form to the building administrator (District's designated bullying contact)

Date: _____

Name of person writing this report: _____

Check whether you are the: Target of the behavior Reporter (not the target)

Check whether you are a: Student Staff member (specify role): _____
 Parent Administrator Other (specify): _____

Name of person bullied/harassed (target): _____

School: _____ Grade: _____

Name(s) of bully/ies: _____

Description of the incident(s) (answer who, what, where, when, how) (use back or another sheet if necessary):

Where did the incident happen? Check all that apply:

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> Bus | <input type="checkbox"/> Hallway | <input type="checkbox"/> School sponsored activity or event |
| <input type="checkbox"/> Commons | <input type="checkbox"/> Internet/Social Media | <input type="checkbox"/> To/from school |
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Locker Room | <input type="checkbox"/> Restroom |
| <input type="checkbox"/> Gym | <input type="checkbox"/> Other: _____ | |

Name(s) of witnesses (teachers, staff, other students): _____

Has this kind of incident happened to the target before? Yes No

If yes, how many times? _____ When? _____

Has this kind of incident happened to anyone else? Yes No

If yes, who? _____

Has this kind of incident happened involving bully/ies before? Yes No

Circle all behaviors that apply:

Continued on the back

PHYSICAL CONDUCT - Harm to another's body or property

- | | | | |
|----------------------------------|---------------|-----------|----------------------|
| -Threatening physical harm | -Pinching | -Tripping | -Assault w/ a weapon |
| -Making threatening gestures | -Scratching | -Biting | -Extortion |
| -Starting a fight | -Hair pulling | -Hitting | -Sexual assault |
| -Cornering or blocking | -Spitting | -Punching | -Arson |
| -Pushing | -Slapping | -Kicking | -Theft |
| -Destroying or defacing property | | | |

EMOTIONAL CONDUCT - Harm to another's self-worth

- | | | |
|---|------------------------------------|--|
| -Threatening to secure silence | -Name calling | -Insulting/degrading graffiti |
| -Challenging in public | -Taunting | -Insulting gestures |
| -Insulting remarks | -Dirty looks | |
| -Harassing and/or frightening phone calls, emails, or texts | -Defacing or falsifying schoolwork | -Racial, ethnic or religious slurs or epithets |
| -Unwanted sexually suggestive remarks, images or gestures | | |

RELATIONAL CONDUCT - Harm to another through damage (or threat of damage) to relationship or feelings of acceptance, friendship, or group inclusion

- | | | |
|---|------------------------------------|-----------------------------|
| -Playing mean tricks | -Passively not including in group | -Insulting publicly |
| -Exclusion | -Gossiping | -Ruining a reputation |
| -Ostracizing/total group rejection | -Arranging public humiliation | -Starting/spreading rumors |
| -Undermining other relationships | -Threatening to end a relationship | -Ignoring someone to punish |
| -Using negative body language or facial expressions | | |

Describe any physical evidence that exists related to the incident (including physical marks, video/audio, printouts/screenshots of social media and other websites, emails, photos, text messages, etc.) Be advised that photos should be taken and printed off for all evidence contained on cell phones (i.e. text messages, photos, social media activity): _____

****Where possible, please attach copies of all evidence information to this report.****

This form is for reporting purposes only and not to be used to interview or interrogate an individual. Any and all information contained in this report is to remain confidential, and is not to be shared with any outside party. Anyone who wishes to make a report of bullying may use this form as an initial step in the process. Other methods of reporting include contacting a teacher, counselor, principal or other District employee.

A student or adult who intentionally makes a false claim, offers false statements, or refuses to cooperate with a District investigation regarding bullying shall be subject to appropriate disciplinary action.

The District prohibits retaliation (i.e. threats, rumor spreading, ostracism, assault, destruction of property, etc.) by a student or District employee against any person who makes a report of bullying in good faith, serves as a witness, or participates in an investigation.

Additional comments:

Signature of person making the report

Date

Form given to: _____ Position: _____ Date: _____