

**RSU 54/MSAD 54
Bullying and Cyberbullying Reporting Form**

Bullying or suspected bullying is reportable in person or in writing to school personnel. Upon completion of this form, or when providing a verbal report, submit to designated school personnel or administrative office.

Date the alleged incident of bullying is being reported: _____

Person(s) reporting the alleged incident(s) of bullying (this is optional as reports can be made anonymously, except when reported by staff, coaches and advisors): _____

Person(s) completing this form (if different than person listed above and not anonymously reporting): _____

Person reporting is:

student parent grandparent guardian staff coach advisor other

Contact information of person reporting (optional): Home/work phone: (____) _____

Cell phone: (____) _____ email: _____

Address: _____

Details

Name of student(s) who is believed to have been bullied: _____

Name of the student(s) or adult(s) who is alleged to have bullied: _____

_____ Date(s): _____

Time(s)/time(s) of day: _____

Location(s) of incident(s): _____

Were there any witnesses? yes no

If so, please provide names of witnesses to be contacted during the investigation:

Please provide a description of incident(s) and include any supporting documentation:

(use additional pages, if needed)

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

_____ Date: _____
 Signature of person reporting (optional)

Received by: _____ Date: _____
 Position/title: _____

Copy to school principal on: _____
 Date

Copy received: _____ Date: _____
 Signature of school principal

Copy to superintendent on: _____
 Date

Copy received: _____ Date: _____
 Signature of superintendent