## Greenfield-Central Community School Corporation Bullying Incident Reporting Form

Name of Person Completing Form (may remain anonymous):		Date of Form Submission:	
<ul> <li>Definition of Bullying: "Bullying" means overt, unwanted, rep manner (including digitally or electronically), physical acts com against another student with the intent to harass, ridicule, humil hostile school environment that:</li> <li>(1) places the targeted student in reasonable fear of harm to (2) has a substantially detrimental effect on the targeted stu (3) has the effect of substantially interfering with the target (4) has the effect of substantially interfering with the target provided by the school.</li> </ul>	amitted, aggression, or any other b iate, intimidate, or harm the target o the targeted student's person or p ident's physical or mental health; ted student's academic performance	behaviors, that are committed by a student or group of students ted student and create for the targeted student an objectively property; ce; or	
Date and Time of Incident(s):	Location of Incident(s):		
Student(s) Initiating Alleged Bullying:			
Student(s) Affected:			
Student Witness(es):			
Spitting	_ Writing / graffiti _ Shoving / pushing _ Threatening _ Hitting / kicking _ Taunting / ridiculing _ Showing a weapon	Damaging property         Inappropriate touching         Intimidation / extortion         Intentional exclusion         Cyberbullying / text message         Other	
Background:			
Notes	Websites/Social Media Voice Message Video Recording	Text Message Other:	
	that apply): Asked the student to stop Stayed with a group	Told a school staff member Other:	
Follow up required by administrator/comments:			
Substantiated as Bullying?YesNo If no, why (co	onflict, one-time incident, etc.)?		
Date the incident was substantiated as bullying (if applicable	e):	Witness Notes:	
<b>Type of Substantiated Bullying:</b> Verbal Social/Relational Written Communication/E	lectronic Physical		
Investigative Checklist: Counselor/social worker involved (Name:	Date Contacted: Date Contacted: ent:)	Phone / Email / Other)	
Administrator Signature	Date		