

Harassment, Intimidation, Bullying, and Cyberbullying Behavior Checklist

Directions: In accordance with the provisions of Act 755 of the 2010 Legislative Session, this form is to be used to document the details of each reported incident of harassment, intimidation, and bullying that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school. It also is to be used to address cyberbullying.

Today's Date: ____/____/____ School Name: _____ District: Clarke

Date of incident: ____/____/____ Time of incident _____

Name of student target (victim) _____ Age: _____ Grade: _____

Ethnic origin of victim _____ ☐ Male ☐ Female

Name(s) of alleged perpetrator(s)	Age	Male	Female	Ethnic origin

Indicate type of incident: ☐ Harassment ☐ Intimidation ☐ Bullying ☐ Cyberbullying

Check all items below that apply:

Verbal		Physical	
Name-calling		Kicking	
Taunting/ridiculing		Hitting/punching	
Mocking		Pushing	
Making offensive comments		Pinching	
Teasing		Stalking	
Demeaning comments		Inappropriate touching	
Other (please state)		Other (please state)	
Emotional		Electronic Aggression (Cyberbullying)	
Offensive graffiti		Offensive text messages	
Excluding from group		Offensive e-mails	
Spreading rumors		Sending degrading images	
Being forced to do something against his/her will		Posting rumors or lies about someone	
Taking possessions/money		Assuming a person's electronic identity with the intent of causing harm	
Other (please state)		Other (please state)	

Where did the incident happen (choose all that apply)?

- | | | | |
|--|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Classroom | <input type="checkbox"/> Lunchroom | <input type="checkbox"/> School Bus | <input type="checkbox"/> Locker Room/Area |
| <input type="checkbox"/> Restroom | <input type="checkbox"/> Hallway | <input type="checkbox"/> Bus Stop | <input type="checkbox"/> Parking Lot |
| <input type="checkbox"/> On the way to/from school | <input type="checkbox"/> Playground | <input type="checkbox"/> Internet | <input type="checkbox"/> Cell Phone |
| <input type="checkbox"/> At a school sponsored activity or event off school property | | | |
| <input type="checkbox"/> Other (please specify) _____ | | | |

Were there any witnesses? ☐ Yes ☐ No

If yes, please provide their names: _____

Physical evidence, if available: Graffiti _____ Notes _____ E-mail _____ Web sites _____
Video/audio tape _____ Other _____

If you feel the incident was in any way motivated by any of the following please indicate by checking where appropriate.

- ☐ Appearance ☐ Disability ☐ Home circumstances
☐ Gender ☐ Race/ethnic origin ☐ Medical condition
☐ Religion ☐ Sexual Orientation
☐ Other (explain) _____

Is there any other relevant information that you would like to provide?

Action taken

Non-disciplinary Interventions	Disciplinary Interventions
Student counseling	Temporary removal from the classroom
Parent conference	Denial of privileges
Mediation	Detention
	Referral to disciplinarian
	In-school suspension
	Out-of-school suspension
	Expulsion
	Legal action

Have you had contact with the victim's parent/guardian? ☐ Yes ☐ No

Have you had contact with the perpetrator's parent/guardian? ☐ Yes ☐ No

Have you reported this incident to any other agencies? ☐ Yes ☐ No

If 'yes' which agencies?

Name of the person Filing Report

Title

Signature of Person Filing Report

Date