



# Frank Augustus Miller Middle School

17925 Krameria Avenue  
Riverside, CA 92508  
(951) 789-8181

## Bullying, Harassment, or Intimidation Reporting Form

This form is to be kept confidentially maintained.

Bullying, harassment, and intimidation are serious and will not be tolerated. This form is used to report alleged harassment, intimidation, or bullying that occurred on school property, at a school-sponsored event or activity off of school property, on a school bus, or on the way to and from school, in the current school year. If you would like to report an incident of alleged bullying, harassment, or intimidation, complete this form and return it to any staff member at school. All forms will then be sent to the assistant principal for investigation. You may contact the school for additional assistance at any time.

Today's date: \_\_\_\_\_

Person Reporting Incident: \_\_\_\_\_

Telephone (if not a current student): (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Please check the appropriate box:  Faculty/Staff       Student       Parent/Guardian/Family Member

1. Name of student victim: \_\_\_\_\_

2. Please list alleged offenders in the table below.

<i>Name(s) of alleged offenders:</i>	<i>Age/Grade</i>	<i>School</i>	<i>Is he/she a student?</i>
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

3. On what date(s) did the incident happen? \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_

4. Where did the incident happen? (Examples: at the bus stop, at home, in class, at lunch, in the locker room, etc.)

\_\_\_\_\_  
\_\_\_\_\_

5. Please describe the alleged incident of harassment/bullying/intimidation in detail. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Why did the alleged incident occur? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. List any witnesses that were present: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
8. How did you learn about the incident? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
9. Did a physical injury result from this incident?  
 No                       Yes, but it did not require medical attention                       Yes, and it required medical attention
10. If there was a physical injury, do you think there will be permanent effects?                       Yes                       No
11. Was the student victim absent from school as a result of the incident?                       Yes                       No  
 a. If yes, how many days was the student victim absent from school as a result? \_\_\_\_\_
12. Did a psychological injury result from this incident?  
 No     Yes, but psychological services have not been sought     Yes, and psychological services have been sought.
13. Who have you reported this to? (parents, teachers, friends, administrator, etc.—be specific) \_\_\_\_\_  
 \_\_\_\_\_
14. What would you like for an adult to do to help? (Example: listen to the victim, talk to the other students, what for similar behavior, disciplinary action) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
15. Is there any additional information you would like to provide? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**I certify that the information I have provided in this complaint is true, correct, and complete to the best of my knowledge.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Received by:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

All reported incidences will be investigated, but not every incident will result in school discipline.