

**West Hartford Public Schools**  
**Secondary Student (Grades 9-12) Form for Reporting Bullying Behavior**  
*ACT Now~ Acknowledge- Care- Tell*

Bullying definition: "Bullying" means the repeated use by one or more students of a written, oral or electronic communication, directed at or referring to another student attending school in the same school district or a physical act or gesture by one of more students repeatedly directed at another student attending school in the same school district that:

- A. causes physical or emotional harm to such student or damage to such student's property,
- B. places such student in reasonable fear of harm to himself or herself, or of damage to his or her property,
- C. creates a hostile environment at school for school students,
- D. infringes on the rights of such student at school, and
- E. substantially disrupts the education process or the orderly operation of a school.

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1. **Name of targeted student** (Please print) \_\_\_\_\_ (Grade) \_\_\_\_\_  
 2. **Name(s) of alleged student offender/s (if known)?** \_\_\_\_\_  
 3. **On what date(s) did the incident happen?** \_\_\_\_\_  
 4. **Where did the incident(s) take place? (Check all that apply)**

- On school property
- On the way to/from school
- Online or electronically
- At a school-sponsored activity/event off school property
- Other: \_\_\_\_\_ (*please explain*)

5. **Place a check  next to the statement(s) that best describes what has occurred (check all that apply):**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Teasing, name-calling, making critical remarks, or threatening, in person or by other means | <input type="checkbox"/> Any bullying, harassment, or intimidation that involves physical aggression | <input type="checkbox"/> Getting another person to hit or harm the student |
| <input type="checkbox"/> Making rude and/or threatening gestures   | <input type="checkbox"/> Demeaning & making him/her target of jokes                                  | <input type="checkbox"/> Intimidating (bullying), extorting, or exploiting |
| <input type="checkbox"/> Spreading harmful rumors or gossip  | <input type="checkbox"/> Electronic communications (specify)   | <input type="checkbox"/> Excluding or rejecting the student                |
| <input type="checkbox"/> Other (specify)   | <input type="checkbox"/>   | <input type="checkbox"/>   |

6. **What did the alleged offender(s) say or do? Please describe in as much detail as possible, what happened. List evidence, if any (i.e. letters, photos, etc. –attach evidence if possible). Use reverse side as needed.**

7. **If you know any of the witnesses involved, please provide as much detail as possible about these people.**

8. **Submitting your Referral** Date of Referral: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Please check **one**:  Submitted **anonymously**  
 Submitted with **confidential identity** Reporter's Name \_\_\_\_\_ Gr. \_\_\_\_\_

*If you provide your name, you will retain your right to keep your name confidential during and after the investigation unless you state otherwise.*

**You may place this form in one of the Anonymous Bullying Reporting Boxes or turn it in to an administrator, school counselor or another trusted adult. An administrator will begin an investigation within 24 (school-day) hours upon receipt of this form.**

**TO BE COMPLETED BY ADMINISTRATOR**

Date Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ By Whom: \_\_\_\_\_  
 Date Student/Parent Contacted: \_\_\_\_/\_\_\_\_/\_\_\_\_ By Whom: \_\_\_\_\_ Bullying Verified: Y\_\_\_\_N\_\_\_\_