

For Administrative Use

Date Received: \_\_\_\_\_  
Received By: \_\_\_\_\_  
Incident Assigned For Investigation To: \_\_\_\_\_  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

**LIVINGSTON PUBLIC SCHOOLS**  
**Harrassment/Intimidation/Bullying/Hazing Incident Reporting Form**

Name of School \_\_\_\_\_ Date \_\_\_\_\_

**Reporting Person Information (Optional):**  
Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

I am a:     Student                       Staff Member                       Parent/Guardian

Administrator                       Self-Reporting                       Other: \_\_\_\_\_

Name of Victim: \_\_\_\_\_

Name(s) of Aggressor (please describe if not known):  
\_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_\_ Grade \_\_\_\_\_  
\_\_\_\_\_ Grade \_\_\_\_\_

Date/Time of Incident: \_\_\_\_\_

Where did the incident occur?  
 On School Property     At a School Sponsored Activity or Event Off School Property  
 School Bus                       On the Way To/From School                       Electronic

**Check All That Describes The Incident:**

Physical (pushing, shoving, hitting, fighting, kicking, throwing items, etc)

Emotional (name calling, insults, teasing, verbal threats, staring/leering, etc)

Social (rumors, exclusion, embarrassment, graffiti, jokes, gestures, etc)

Sexual (inappropriate comments/touching, sexual orientation references etc)

Cyber (threatening or harassing texts/I-M's/calls, defamatory posts/e-mails, etc)

Property (vandalism, theft, demanding money, exploiting, or fear of such, etc)

Other (please describe) \_\_\_\_\_

\_\_\_\_\_

Please Describe the Incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical Evidence:  Graffiti  E-mail  Photo/Video  Website  
 Notes  Other: \_\_\_\_\_

Other Students Involved (please indicate whether witness, bystander, or victim):

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Is this a Repeat Offense?

No this is a one-time incident

Yes, date and description of incident(s): \_\_\_\_\_  
\_\_\_\_\_

Have you Ever Reported this information Before? \_\_\_\_\_ With Whom: \_\_\_\_\_ Date \_\_\_\_\_

Did a physical injury result from this incident?

No  Yes, but it did not require medical attention

Yes, and it required medical attention

Was the student/victim absent from school as a result of the incident?  No  Yes, \_\_\_ Days

Have you contacted the police?  No  Yes: Officer \_\_\_\_\_ Date: \_\_\_\_\_

Is there any additional information you would like to provide? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand the serious nature of this report and I agree that all of the information is accurate and true to the best of my knowledge:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please type/print name: \_\_\_\_\_

\*Please note: anyone who files a report he/she knows to be false will be held responsible and may be reported to an appropriate law enforcement agency.