## Auburn School District Harassment, Intimidation & Bullying Incident Report Form

<u>Instructions:</u> Harassment, intimidation and bullying are serious offenses and will not be tolerated. If you have been a witness to or suspect a bullying offense, please complete the form below and return it to the principal's office at your school or to the district office. This form may be completed anonymously but no disciplinary action will be taken based solely on the basis of an anonymous report or phone call.

Today's Date:	_ Na	me of Tar	geted S	Student:						
Age: Grade:			Stu	dent #:						
Name of School:										
Person Reporting Incident:							🗆 I p	refer to re	emain a	nonymous
Relationship to Targeted Student:		Self	[	□ Witne	ess/Bystander Adult Relativ		□ Paren	t/Guardia	n	
Name(a) of Dullies if Impount		Stud	lent		Name(s) of	Witness	ses/Bysta	anders,	Stu	ıdent
Name(s) of Bullies, if known:		Yes	No		100				Yes	Student ss No
Date(s) of Incident(s):  School adults already contacted:  Is this an ongoing issue?  Have you witnessed the accused	d bully	exhibit b	ullying	y/harassi		<b></b>				nknown
toward you, the targeted studen If yes, how many times?										
Was a report filed for the previous If yes, when:	ous tin	ies?								
Where did this incident occur?										
At School  ☐ Classroom ☐ Cafeteria ☐ Locker Room ☐ Hallway or Lockers		□ P	chool ( arking	Club/Ac Lot s/Comm	tivity on Areas	]	☐ Schoo ☐ Schoo ☐ Way 1	Froperty ol-Sponso ol Bus/Bu to/from Se	s Stop chool	ivity
☐ Restroom ☐ Other (describe):			^			[		Phone/Tex		

☐ Getting another person to harm the targeted student ☐ Theft☐ Threats/intimidation ☐ Stalki☐ Teasing/name calling/critical remarks ☐ Public☐ Demeaning and making student a target of jokes ☐ Make☐ Rude or threatening gestures ☐ Racia	□ Social exclusion/rejection □ Theft/damaged possessions □ Stalking/ongoing harassment □ Public humiliation □ Make fearful, demand money/exploiting □ Racial comments □ Sexual comments				
Please describe what happened in your own words, including what the alle sheet, if needed):	ged offender(s) said (	or did (attacl	n a separate		
Why do you think the incident(s) happened? (attach a separate sheet, if nee	eded);				
	Yes	No	Unknown		
	1 63	110	CHILLAROTTI		
Did physical injury result from this incident?	7.03		CHAZOWA		
Did physical injury result from this incident?  If yes, was medical attention required?	7 65				
If yes, was medical attention required?  If there was physical injury, will the targeted student have permanent effective.					
If yes, was medical attention required?  If there was physical injury, will the targeted student have permanent effer a result?  Was the targeted student absent from school because of the incident?					
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honorably discharged veteran or military status; the presence of any sensory, mental, or physical disability; the use of a trained dog

Inquiries regarding compliance procedures may be directed to:

Daman Hunter at (253) 931-4932, Title IX Officer and Section 504 and ADA Coordinator.

guide or service animal; and provides equal access to the Boy Scouts and other designated youth groups.