

Valley Road School, Stanhope N.J.
Harassment - Intimidation - Bullying
Incident Report Form

Today's Date: _____ **Date of Incident:** _____

Person Completing Report: Name _____

Check one _____ Student _____ Staff _____ Parent _____ Other

Check one _____ Victim _____ Alleged Aggressor _____ Witness (in person or told)

Date(s) and Location(s) of Alleged Incident(s)

Date: _____

Location: _____ School Grounds, Identify _____

_____ School Sponsored Function, Identify _____

_____ Electronic Communication, Identify _____

_____ Off School Grounds, Describe _____

History of Previous Contact between Parties:

Type of Harassment, Intimidation and/or Bullying Alleged:

_____ Racial _____ Religious _____ Sexual _____ Gender Based

_____ Sexual Orientation, Gender Identity/Expression _____ Mental or Physical Disability

_____ Other Actual or Perceived Characteristic(s) (Please List)

Person(s) you believe may have relevant information about this incident(s)

_____ Student _____ Staff _____ Parent _____ Other

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What harm do you believe was or may have been caused by the alleged incident? Check all that may apply, with a brief explanation...

_____ Physical or Emotional Harm

_____ Insulting or Demeaning

_____ Substantial Disruption to School

_____ Substantial Disruption to Rights of Others

_____ Creates a Hostile School Environment

_____ Interferes with Student's Education

