Auburn Union School District Anonymous Bullying or Harassment Report Form

Complete this form if you have credible information regarding a bullying or harassment incident and want to report it anonymously. *Submit it to the school secretary.* This form is completely anonymous. Please type or print clearly.

School:		Report Date:	Report Time:
Alleged Victim's Name (last, first, middle)	Age:	Grade/Dept.	Gender/Race
Alleged Perpetrator's Name (last, first, middle)	Age:	Grade/Dept.	Gender/Race
Where did the incident occur? Be specific (i.e. classroom, hallway,	, cafeteria, playground	d, bus)	
When did the incident occur? Day: Date	2:	Time:	AM/PM
What happened? Describe in detail:			
Were there any witnesses? Yes No (Circle One) Provide their name(s) and contact information below:			
List and attach any evidence of bullying or harassment. (i.e. letters, text, photo, etc.)			
Was there a previous report filed by anyone regarding this incider	nt? Yes No (Circle On	e) When?	
Was there a police report filed? Yes No (Circle One)	If so, when?		
Have you been bullied or harassed or witnessed bullying or harass	sment by this person b	pefore? Yes No (Circle One)
If so, how many times? Was a report filed for the previous	us time(s)? Yes No (C	Circle one) When?	
This report will be investigated in a timely manner. If y staff member at your child's school or law enforcemen		_	ger, contact a
Office Use:			
Findings:			
Investigator's Name:	Investigator's Signature:		