

**Housatonic Valley Regional High School**  
**Falls Village, CT**  
**Bullying, Harassment or Intimidation Report Form**

<b>Note to Person Reporting:</b> This form will be confidentially maintained in accordance with the Family Educational Rights and Privacy Act (FERPA) and will not be shared with anyone except those working to assist in this important matter.		
Name of Person Reporting (Optional):		Grade:
Name of Alleged Victim/Person being hurt:		Grade:
Name of Alleged Offender(s):		Grade:
Witness(es):		
Date of incident/When did this happen?	Time:	Location/Place:
Place an <input checked="" type="checkbox"/> next to the statement(s) that best describes what happened: <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> Physical aggression (shoving, punching, etc.)</div> <div style="width: 50%;"><input type="checkbox"/> Exclusion or rejection of the student</div> <div style="width: 50%;"><input type="checkbox"/> Getting another student to hit/harm student</div> <div style="width: 50%;"><input type="checkbox"/> Spreading rumors/gossip</div> <div style="width: 50%;"><input type="checkbox"/> Teasing, name calling, criticizing, or threatening</div> <div style="width: 50%;"><input type="checkbox"/> Making rude and/or threatening gestures</div> <div style="width: 50%;"><input type="checkbox"/> Intimidating, extorting, or exploiting</div> <div style="width: 50%;"><input type="checkbox"/> Electronic communication</div> <div style="width: 50%;"><input type="checkbox"/> Other:</div> </div>		
What did the alleged offender(s) say or do?	Please describe:          <div style="text-align: right;">(Attach a separate sheet if necessary)</div>	
How often/many times has this happened?		
Why did the harassment, bullying, or intimidation occur?	Please describe:          <div style="text-align: right;">(Attach a separate sheet if necessary)</div>	

I have read this document and agree this summary is a true and accurate record of my report.  
I agree that this information is the truth.

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

For Staff Use Only:	
Administrative Investigation Notes:	<hr/> <hr/> <hr/> <hr/> <hr/>
Bullying Verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Remedial Action Taken:	<hr/> <hr/> <hr/> <hr/> <hr/>
Notification of Parents of Students Involved	Date: _____
Meetings with Parents of Students Involved	Date: _____