

# ST. FRANCIS XAVIER SCHOOL

## Bullying, Cyberbullying, and/or Incident Report Form

Name of Target Student \_\_\_\_\_

Grade \_\_\_\_\_

Parent(s) name \_\_\_\_\_

Date \_\_\_\_\_ Time: \_\_\_\_\_ Circle am pm

Name of reporter, if different from Target Student \_\_\_\_\_

Relationship of reporter to Target Student \_\_\_\_\_

List the full name(s) and grade(s) of the alleged bully(ies), and/or cyberbully(ies). If name(s) is/are not known, provide any other identifiable information:

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What is the relationship between you and the alleged bully(ies) and or cyberbully(ies)?

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Describe the incident:

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When and where did incident happen?

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Were there any witnesses? \_\_\_\_\_ Yes \_\_\_\_\_ No

Witness names, if any:

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Other information pertaining to this incident:

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Has this type of incident happened before? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, how many times? \_\_\_\_\_

Describe previous incidents or threats:

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Were authorities notified, i.e. police or child protection services? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, name of authority and date of notification: \_\_\_\_\_

Was a report submitted to this authority? \_\_\_\_\_ Yes \_\_\_\_\_ No

I agree/certify that all statements made in the complaint are true and complete. Any intentional false statement of fact will subject me to appropriate discipline and or actions of the school administration.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date