## Harassment, Intimidation, Bullying (HIB) Determination Form

**Confidential**

**Directions:** Harassment, Intimidation & Bullying are serious offenses and will not be tolerated. This form is to report an alleged incident that occurred on school property, at a school sponsored event or activity, off of school property, or on a school bus. Please complete this form and return to the School Principal or Anti-Bullying Specialist, even after you have verbally reported that incident. You may report anonymously. Please contact your school’s office for additional information or assistance. **Please Return to School Principal or Anti-Bullying Specialist.**

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**Name/Contact of Reporter:**

**Signature of Reporter:**

**Date:**

**Person reporting incident:**

- Student
- Staff
- Member
- Parent/Guardian
- Volunteer
- Other

**Name of Targeted Pupil:**

**Date & Location of Incident:**

**Name of Student(s)/Person(s) Accused of HIB Behavior:**

Mark **ALL** boxes below in which the actual or perceived characteristic was or may have been a motivational factor in the alleged HIB incident:

- Race:
- Color:
- Religion:
- Ancestry:
- National Origin:
- Gender:
- Sexual Orientation:
- Gender Identity/Expression:
- Mental or Physical or Sensory Disability:

**Other actual or perceived characteristic:** (Please list)

**Type of Incident:** (Circle all that apply)

- Gesture
- Written
- Verbal
- Physical
- Electronic

**Witness of Incident:**

Check next to **ALL** the statement(s) that best describes what happened.

- Any act of physical aggression
- Getting another person to hit or harm the student
- Teasing, name-calling, making critical remarks, or threatening, in person or by other means
- Demeaning and making the victim the object of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Extorting or exploiting
- Spreading harmful rumors or gossip
- Electronic communication (specify):

If other than above, describe the nature of the alleged harassment, intimidation or bullying. Include any gesture, relevant verbal, written or physical act(s), or any electronic communication.
<table>
<thead>
<tr>
<th>What harm do you believe was or may have been caused by the alleged incident? Check all that apply.</th>
</tr>
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<tbody>
<tr>
<td>Substantial disruption or interference with orderly operation of school rights of others: ☐</td>
</tr>
<tr>
<td>Fear of physical/emotional harm: ☐</td>
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<tr>
<td>Created a hostile educational environment: ☐</td>
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</tbody>
</table>

*You may choose to submit this report anonymously. Please note, in accordance with the Anti-Bullying Bill of Rights Act, no formal disciplinary action is permitted on the basis of anonymous reporting alone.*

| Signature of Person Receiving Report | Title | Date Received |