

Monroe County School District Elementary Bullying or Harassment Report Form

This report should be filled out if:
You are being bullied or if you have witnessed someone else being bullied.

FIRST NAME: _____ LAST NAME: _____

DATE: _____ TEACHER'S NAME _____

SCHOOL NAME: _____

1. I am being bullied: YES NO
2. I have seen someone being bullied: YES NO
3. Write what happened:

WHO?

WHAT?

WHEN?

WHERE?

WHY?

Thank you. This report will be followed up in a prompt manner. By completing this form, you are verifying that your statements are true and exact to the best of your knowledge. If you fear a student is in IMMEDIATE danger, contact a trusted adult, their home school, the police or the Monroe County School District at (305) 293-1400 ext 54444 immediately!

For Office Use Only

Date Received:	
Received By:	