Monroe County School District Bullying Anonymous Reporting Form

If you have information regarding bullying and would like to report this information anonymously, <u>please fill</u> out the following form to the best of your knowledge. Please note that this form is completely anonymous. (For the purpose of this form, bullying encompasses bullying, harassment, and discrimination.)

VICTIM NAME (last, first, middle)	SEX	GRADE	AGE
ACCUSED NAME (last, first, middle)	SEX	GRADE	AGE
SCHOOL	SCHOOL TELEPHONE		
PRINCIPAL	TODAY'S	DATE	
TRIVEITAL			
Where did the incident occur?			
When did the incident occur? Date:Time:			
Please describe, in as much detail as possible, what happened.			
Do you know any of the witnesses involved? If so, please provide a	s much detail a	s possible about	these people.
List evidence of bullying if any (i.e. letters, photos, etc. –attach evid	lence if possibl	e)	
This form may be dropped or mailed to the School or District Office. To act(s) of bullying and/or harassment, written or oral reporting would be rebased solely on the basis of an anonymous report. Thank you, this report days. If you fear a student is in IMMEDIATE danger, contact their home School District at (305) 293-1400 ext. 54444 immediately!	equired. Formal will be followed	disciplinary action d up on within 2 s	n may not be chool/work
For Office Use Only			
Date Received:			