**New Century Academy**

**Bullying and Harassment Incident Intake Form**

NOTE: Please return completed form to Mr. Becker

**Date:**

**Name of person writing this report:**

**Check whether you are the: ** Target of the behavior  Reporter (not the target)

**Check whether you are a: ** Student  Staff member (specify role):

  Parent  Administrator  Other (specify):

**Name of student bullied/harassed (target):**

**School:**   **Grade:**

**Name(s) of bully/ies:**

**Description of incident(s) (answer who, what, where, when, how) (use back or another sheet if necessary):**

**Where did the incident happen? Check all that apply:**

 Bus

 Cafeteria

 Classroom

 Gym

 Hallway

 Internet/Social Media

 Locker Room

 Restroom

 School sponsored activity or event

 To/from school

 Other:

**Name(s) of witnesses (teachers, staff, other students):**

**Has this kind of incident happened to the target before? ** Yes  No

**If yes, how many times?** **When?**

**Has this kind of incident happened to anyone else? ** Yes  No

**If yes, who?**

**Has this kind of incident happened involving bully/ies before? ** Yes  No

*Continued on back*

Circle all behaviors that apply.

**PHYSICAL CONDUCT -- *Harm to another’s body or property***

-Threatening physical harm

-Making threatening gestures

-Starting a fight

-Cornering or blocking

-Pushing

-Pinching

-Scratching

-Hair pulling

-Spitting

-Slapping

-Kicking

-Tripping

-Biting

-Hitting

-Punching

-Destroying or defacing property

-Theft

-Assault with a weapon

-Extortion

-Sexual assault

-Arson

-Homicide

**EMOTIONAL CONDUCT -- *Harm to another’s self-worth***

-Threatening to secure silence

-Challenging in public

-Insulting gestures

-Dirty looks

-Insulting remarks

-Name Calling

-Taunting

-Racial, ethnic or religious slurs or epithets

-Insulting remarks

-Defacing or falsifying schoolwork

-Insulting/degrading graffiti

-Harassing and/or frightening phone calls, emails, text or phone messages

-Unwanted sexually suggestive remarks, images or gestures

**RELATIONAL CONDUCT -- *Harm to another through damage (or threat of damage) to relationship or feelings of acceptance, friendship or group inclusion***

-Using negative body language or facial expressions

-Threatening to end a relationship

-Gossiping

-Starting/spreading rumors

-Playing mean tricks

-Insulting publicly

-Ruining a reputation

-Ignoring someone to punish or coerce

-Undermining other relationships

-Passively not including in group

-Exclusion

-Ostracizing / total group rejection

-Arranging public humiliation

**Describe any physical evidence that exists related to the incident (including physical marks, video/audio, printouts/screenshots of social media and other websites, emails, photos, text messages, etc.) Be advised that photos should be taken and printed off for all evidence contained on cellphones (i.e. text messages, photos, social media activity.):**

**\*\*Where possible, please attach copies of all evidence information to this report. \*\***

**This form is for reporting purposes only and not to be used to interview or interrogate an individual. Any and all information contained in this report is to remain confidential, and is not to be shared with any outside party. Anyone who wishes to make a report of bullying may use this form as an initial step in the process. Other methods of reporting include contacting a teacher, counselor, principal or other District employee.**

**A student who intentionally makes a false claim, offers false statements, or refuses to cooperate with a District investigation regarding bullying shall be subject to appropriate disciplinary action.**

**The District prohibits retaliation (i.e. threats, rumor spreading, ostracism, assault, destruction of property, etc.) by a student or District employee against any person who makes a report of bullying in good faith, serves as a witness, or participates in an investigation.**

**Additional comments:**

**Signature of person making the report Date**

**Form given to: Position: Date:**