



# SALINAS UNION HIGH SCHOOL DISTRICT

## Harassment, Intimidation or Bullying Reporting Form

5. Place an **X** next to the statement(s) that best describes what happened (choose all that apply):

- Hitting, kicking, shoving, spitting, hair pulling, or throwing something
- 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 of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting
- Spreading harmful rumors or gossip
- Other (specify) \_\_\_\_\_

6. What did the alleged offender(s) say or do? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Why did the alleged harassment or intimidation (bullying) occur?

- Race or Color       Religion
- Sex/Gender       Physical or Mental Disability
- Sexual Orientation       Other : \_\_\_\_\_

8. Did a physical injury result from this incident? Place an **X** next to one of the following:

- No       Yes, but it did not require medical attention       Yes, and it required medical attention

9. If there was a physical injury, do you think there will be permanent effects?     Yes       No

10. Was the student victim absent from school as a result of the incident?       Yes       No

If yes, how many days was the student victim absent from school as a result of the incident? \_\_\_\_\_

11. Did a psychological injury result from this incident? Place an **X** next to one of the following:

- No       Yes, but psychological services have not been sought.
- Yes, and psychological services have been sought.

12. Is there any additional information you would like to provide? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_