



WEST OSO INDEPENDENT SCHOOL DISTRICT

OFFICE OF THE SUPERINTENDENT
5050 ROCKFORD DRIVE
CORPUS CHRISTI, TEXAS 78416
PHONE: (361) 806-5900 FAX: (361) 225-8308



STUDENT BULLYING REPORT FORM

Bullying, harassment, or intimidation are serious and will **NOT** be tolerated. Bullying occurs when a student or group of students engages in written or verbal expression, expression through electronic methods, or physical conduct against another student on school property, at a school sponsored or related activity, or in a district operated vehicle, and the behavior:

- Results in harm to the student or the student's property,
- Places a student in reasonable fear of physical harm or of damage to the student's property, or
- Is so severe, persistent, and pervasive that it creates an intimidating, threatening, or abusive educational environment.

This conduct is considered bullying if it exploits an imbalance of power between the student perpetrator(s) and the student victim and if it interferes with a student's education or substantially disrupts the operation of the school.

If you are a student victim, the parent/guardian of a student victim, or a close adult relative of a student victim, or a school staff member and wish to report an incident of alleged bullying harassment, or intimidation, complete this form and return to the Principal at the student victim's school.

PERSON REPORTING INCIDENT

Telephone: _____

Name: _____

E-mail: _____

Place an X in the appropriate box: Student Student (Witness/Bystander) Parent/guardian
 Close adult relative Relation: _____ School Staff

1. Who was the victim of the bullying? (if you don't know his/her name, describe him/her)? Name: _____

Describe person: _____ Is he/she a student? Yes No

Campus student attends: JFK Elementary West Osó Elementary West Osó Junior High West Osó High School

2. Describe what happened/what is happening:

3. When did it happen? Before School During School After School Unsure

Date(s) _____

Time: _____ Time: _____ Time: _____

4. Where did it happen? Campus: _____ On the school playground In the school parking lot On the school bus

In the school building (list specific room): _____ At a school event (list specific event): _____

Online Unsure Other (please specify): _____

5. Who was committing the bullying? (if you don't know the bully's name(s) describe him/her)

Name: _____ Is he/she a student? Yes No

Name: _____ Is he/she a student? Yes No

Describe person: _____

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6. Did anyone else witness the bullying? (if yes, please list) Yes No Unsure

7. Did physical injury result from this incident?

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

8. Was there damage to anyone's personal property? Yes No

If yes, describe: _____

9. Was the student 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? _____

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

- Any bullying, harassment, or intimidation that involved 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 of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Intimidating (bullying), extorting, or exploiting
- Spreading harmful rumors or gossip
- Electronic Communication (specify) _____
- Other (specify) _____

11. Have you told anyone about the bullying?

Parent Babysitter Brother/sister Other family member: _____
 Teacher Other school staff: Name(s): _____

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

Signature: _____

Date: _____

INTERNAL ADMINISTRATIVE USE ONLY:

Date Received: _____ Date Investigation Initiated: _____

Investigation Assigned to: _____ Position: _____

Campus: JFK Elementary West Oso Elementary West Oso Junior High West Oso High School _____

Date Investigation Was Completed: _____ Investigation Form and Related Documentation Attached