## Fabens Independent School District



Office Use Only: Received By: Date Received:
Student Bullying or Harassment Reporting Form
This form should be used to report a possible incident of bullying or harassment as defined in the Fabens ISD Policy FFI (LOCAL)
Any student /parent/stakeholder can report bullying or harassment by talking to a staff member or by completing this form and returning it to an Assistant Principal, Principal, or Dean of Students. This form may be submitted anonymously.
PLEASE PRINT Your Name (If you want to include it)
Campus Name
Date:
Who is being bullied?
Who is the bully or bullies?
'How many times has the bullying happened?1 time2 times3-5 timesMore than 5 times
Where did it happen?
In the classroomAt recess In the cafeteriaIn the hallOn a school busAt the bus stopOn the way to/from schoolOff-campus school eventRestroom or locker room

\_\_At PE

Other:			
What happened?			
Teasing	Hitting or kicking	Shoving or pushing	
Made fun of	Name calling	Cyberbullying	
Being left out	Threatening Th	eft or property damage	
Gossip and ru	mors being spread		
Other:	0 1		
What did the bully/b	oullies say or do?		
You can sign this for	rm if you want to:		

Thank you. This report will be followed up in a prompt manner. By completing this form, you are verifying that your statements are accurate and true to the best of your knowledge. If you fear a student is in IMMEDIATE danger, please contact a trusted adult right away!