



The Kingdom Charter

S C H O O L O F L E A D E R S H I P

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HARASSMENT, INTIMIDATION, & BULLYING (HIB) INCIDENT REPORTING FORM

This form is to be confidentially maintained in accordance with the
Family Educational Rights and Privacy Act

Directions: This is a form to report alleged harassment, intimidation or bullying that occurred on school property, at a school-sponsored activity or event off school property, on a school bus; or on the way to and/or from school, in the current school year. If you are a student victim, the parent/guardian of the student victim, a close adult relative of a student victim, a staff member, or witness, and wish to report an incident of alleged harassment or intimidation (bullying). Complete this form and return it to the Principal of the student victim's school. Contact the school for additional information or assistance at any time. **PLEASE PRINT ALL INFORMATION.**

Harassment, intimidation, or bullying means any gesture, any written, verbal or physical act or electronic communication which (including telephone, cell phone, computer, etc.) whether it be a single incident or as series of incidents as provided for in section 16 of PL 2010. C 122(C18A 37-15 3), that substantially disrupts or interferes with the orderly operation of the school or the rights of other students and is motivated by an actual or perceived personal characteristic such as race, national origin, sexual orientation, gender, religion, or disability.

***For Anonymous Reports please leave the name portion blank of person completing this form. Anyone filing a false report will face school consequences and police notification.**

Date _____

Date(s) of Alleged Incident _____

Date(s) the Event was Witnessed or Suspected _____

Date of Verbally Reported to Principal _____

Location Alleged Incident _____

Person Completing this Report _____

Name _____

Address _____

Phone Number _____

Email Address _____

Report submitted to: _____

Person(s) Accused of Committing HIB Behavior & Grade

Recipient(s) of HIB Behavior & Grade

I. Circle all actual or perceived characteristics that were or may have been motivational factors in the alleged HIB incident.

Race Color Ancestry National Origin Gender

Sexual Orientation Gender Identity and expression Mental, Physical, or Sensory Disability

Other Actual or Perceived Characteristic (Describe Below)

II. Indicate how you learned that a student may have been the victim of harassment, intimidation, or bullying:

_____ Witnessed Incident

_____ Informed by Alleged Victim

_____ Informed by Other Person (Identify if Student, Parent, Staff, or Other)

III. List below any person(s) who you know or have reason to believe may have relevant information regarding the alleged incident. Please specify if the person is a student, parent, staff member/employee, or other.

IV. Please describe the nature of the alleged harassment, intimidation, or bullying. Include any gestures, any relevant written, verbal, or physical acts, or any electronic communication (attach additional sheets of paper if necessary).

V. Location of alleged incident of Harassment, Intimidation, and/or Bullying (check and complete all that apply)

_____ School Property (Describe) _____

_____ School Sponsored Activity (Describe) _____

_____ School Bus/Bus Stop (Describe) _____

_____ Off School Grounds (Describe) _____

VI. Identify what harm you believe was or may have been caused by the alleged incident. Check all that apply.

_____ Substantial disruption or interference with the orderly operation of the school or rights of others

_____ Physical or emotional harm

_____ Insulting or demeaning

_____ Creates a hostile educational environment

_____ Interferes with the student's education

VII. Please describe, in narrative form, what harm you believe was caused to the student and the basis for your belief.

VIII. Please add any other pertinent information.

Signature of Person Making Report _____

Printed Name of Person Making Report _____

Date Submitted _____

Administratively Assigned Case Number # _____

Does report meet definition of HIB? YES or NO

What action will be taken? _____

- C: Head of School
- Anti- Bullying Coordinator
- Anti- Bullying Specialist