

**INCIDENT REPORT
ANTI-BULLYING POLICY**

1. Name of Complainant _____
2. Date(s) Time(s) of Alleged Incident(s) _____
3. a. Notification of Complainant’s Parent(s) / Guardian(s) _____
Date
- b. Notification of Accused’s Parent(s) / Guardian(s) _____
Date
4. Location of Alleged Incident(s) _____
5. Accused Party _____
6. Witness(es) to the Alleged Incident _____

7. Description of Incident _____

8. Other pertinent history and / or information _____

Additional pages attached () Yes () No

9. Were the Civil Authorities notified? () Yes () No
10. Do you wish to have a conciliatory meeting? () Yes () No*
**If no, fact-finding will take place.*

Signature of Complainant

Date

****Attach incident report to fact-finding sheet when appropriate.***