MODERN MONTESSORI CHARTER SCHOOL
INDEPENDENT SCHOOL DISTRICT NO. 4273

BULLYING REPORT FORM

General Statement of Policy Prohibiting Bullying

Independent School District No. 4273 maintains a firm policy prohibiting all forms of bullying. An act of bullying, by either an individual student or a group of students, is expressly prohibited on school premises, on district property, at school functions or activities, or on school transportation. This applies not only to students who directly engage in an act of bullying but also to students who, by their indirect behavior, condone or support another student's act of bullying. This also applies to any student whose conduct at any time or in any place constitutes bullying or other prohibited conduct that interferes with or obstructs the mission or operations of the district or the safety or welfare of the student, or other students or materially and substantially interferes with a student's educational opportunities or performance or ability to participate in school functions or activities or receive school benefits, services, or privileges. This also applies to an act of cyberbullying regardless of whether such an act is committed on or off school district property and/or with or without the use of school district resources.

Name _____

Home Address _____

Home/Cell Phone_____   Work Phone_____

Date of Alleged Incident(s)_____

Name of person you believe bullied you or another person or group.
_____

If the alleged bullying was toward another person or group, identify that person or group._____
_____
_____
_____

Policy 514 Bullying Prohibition - Reporting Form

Describe the incident(s) as clearly as possible, including such things as: what force, if any, was used; any verbal statements (i.e., threats, requests, demands, etc.); what, if any, physical contact was involved; etc. (Attach additional pages as necessary.) _____

_____

_____

_____

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_____

_____

Where and when did the incident(s) occur?_____

_____

_____

List any witnesses that were present_____

_____

I hereby certify that the information I have provided in this complaint is true, correct, and complete to the best of my knowledge.

_____   _____
Your Name   Date

FOR OFFICE USE ONLY

Received by _____ Date _____

NOTES

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