

**BULLYING REPORT FORM**

Name of complainant/reporter (by law, reports may be anonymous): \_\_\_\_\_ Status of  
reporter: Student Parent School employee/coach/advisor Other \_\_\_\_\_

Contact information for reporter (if reporter is student, contact information for parent/guardian): Phone:  
\_\_\_\_\_ Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_ Address:  
\_\_\_\_\_

Name of alleged target(s): \_\_\_\_\_ Name of alleged  
bully(ies): \_\_\_\_\_ Relationship between alleged  
target/bully(ies): \_\_\_\_\_ Time(s) and location(s) of alleged incident(s):  
\_\_\_\_\_ Names of witnesses:  
\_\_\_\_\_

Description of incident(s) (attached additional pages if more space is needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that the information on this form is accurate and true to the best of my knowledge and belief.

\_\_\_\_\_ Date: \_\_\_\_\_ Signature of complainant/reporter

Received by: \_\_\_\_\_ Date: \_\_\_\_\_ Position/title:  
\_\_\_\_\_

Copy to building principal: Date: \_\_\_\_\_ Copy to Superintendent: Date: \_\_\_\_\_ MAINE SCHOOL

MANAGEMENT ASSOCIATION