



Mukilteo
School District

Harassment, Intimidation or Bullying (HIB) Incident Reporting Form

This form is to be used when any student believes they are the target of unresolved, severe or persistent harassment, intimidation or bullying or any other person(s) in the community who observes or receives notice that a student has or may have been a target of HIB.

Today's Date: _____

Reporting person (optional): _____

Targeted student: _____ Grade: _____

Name of school adult you've already contacted (if any): _____

Name(s) of alleged aggressor(s) (if known): _____
Grade: _____

On what dates did the incident(s) happen (if known): _____
Time/Class: _____

Has this happened before? No Yes If yes, when? _____

Were there any witnesses? No Yes If yes, please provide their first and last names: _____

Where did the incident happen? Check all that apply.

- | | | | | | |
|--|---------|-------------|---------------------------|-------------|------------|
| Classroom | Hallway | Restroom | Playground | Locker Room | Lunchroom |
| Sport field | | Parking lot | School bus | Internet | Cell phone |
| During a school activity off school property | | | On the way to/from school | | |
| Other (Please describe:) _____ | | | | | |

Please check the box that best describes what the aggressor did. Please choose all that apply.

- Hitting, kicking, shoving, spitting, hair pulling or throwing something at the student
- Getting another person to hit or harm the student
- Teasing, name calling, making critical remarks or threatening in person, by phone, by e-mail, etc.
- Putting the student down and making the student a target of jokes
- Making rude and/or threatening gestures
- Excluding or rejecting the student
- Making the student fearful, demanding money or exploiting
- Spreading harmful rumors or gossip
- Cyber bullying (by calling, texting, emailing, web posting, etc.)
- Other (If you select other, please describe:) _____

Please describe the alleged HIB situation:

Why do you think the harassment, intimidation or bullying occurred?

Did a physical injury result from this incident? No Yes If yes, please describe:

Was the target absent from school as a result of the incident? No Yes If yes, please describe:

Is there any additional information?

Thank you for reporting. Please only report what you know or believe to be true. To intentionally give a false report violates district policy and will result in disciplinary action.

-----**For School Office Use**-----

Received by: _____ **Date received:** _____

School official, please check one box below indicating the HIB status of this report:

This is an HIB Incident, please investigate under School Board Policy/Procedures 3216/3216P process.

Upon review and/or investigation for possible HIB, this incident does not meet the definition outlined in School Board Policy and Procedures and will be best resolved using the guidelines found in the Mukilteo School District Discipline Policies/Procedure

When complete: Send copy to the Student Services Director at the DO

11/2021

If your text does not fit in the space provided, please attach a Word document with the additional details.