Bullying Incident Report

Date: [Insert date]

Reported by: [Your Name]

Student(s) Involved: [Name of the individual being reported] & [Name of the reporter]

Incident Date: [Insert date of incident]

Location of Incident: [Where did it happen?]

Details of the Incident:

[Provide a detailed description of the bullying incident, including what occurred, how often it happens, and any witnesses present.]

Impact on the Victim:

[Describe how the incident has affected the victim emotionally, socially, or educationally.]

Actions Taken:

[List any steps taken to address the situation, including discussions with the parties involved, any reporting to authorities, or support provided to the victim.]

Recommended Follow-up Actions:

[Suggest any follow-up actions, additional support needed, or measures to prevent future incidents.]

Signature: _____

Date: _____