PINE TREE ISD
BULLYING INCIDENT REPORT SHEET

Campus: ____________________________________________

Date: ____________________________

Name of Person reporting incident: _______________________________

Please check one of the following: student ___ faculty member___ other ___

Description of Incident:

_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________
_______________________________________________________

Parents of both parties were notified: _____ yes _____ no

Comments:

_______________________________________________________
_______________________________________________________

Counselors have been notified of the incident: _____ yes _____ no

Comments:

_______________________________________________________
_______________________________________________________

Result of Investigation:

_______________________________________________________
_______________________________________________________
_______________________________________________________

Action Taken:

_______________________________________________________
_______________________________________________________
_______________________________________________________