



DEER RIVER

Victim name:	Grade (if known)
Person accused of bullying:	Grade (if known)
Where did the incident occur?	
When did the incident occur (day and time)?	
Were there any other witnesses? If so, list their names and grades	
Describe the incident or incidents in as much detail as possible:	
Is there any evidence of bullying you are aware of? (notes, photos, etc)	
I agree that all the information on this form is accurate and true to the best of my ability:	
Signature of witness	Printed name of witness
	Date

Date Received	
Received by	

Thank you for filling out the form. Your report will be followed up on within 3 school days. If you feel you or another student are in immediate danger, talk to a principal, dean of students, or liaison officer immediately.

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For office Use Only