

# WANAQUE PUBLIC SCHOOLS

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## Harassment, Intimidation, and Bullying Report Form

Person Reporting Incident:

School/Location:

\_\_\_ Student \_\_\_ Staff Member Parent/Guardian \_\_\_ Volunteer \_\_\_ Other:

Date of alleged incident:

Where did the alleged incident occur?

Name of alleged target:

Student(s)/Person(s) accused of exhibiting harassment, intimidation, or bullying behavior:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

Please list below the name(s) of any person(s) you believe either witnessed or have knowledge of the incident you are reporting:

Witness Name

Location/School/Grade

1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

Indicate how you learned that the student may have been the victim of harassment, intimidation, or bullying:

\_\_\_\_\_ Witnessed incident

\_\_\_\_\_ Informed by alleged victim

\_\_\_\_\_ Informed by other person (identify if student, parent, staff person, other, and list below)

\_\_\_\_\_ Anonymous Source

Describe in narrative form the alleged harassment, intimidation, or bullying incident, including what harm you believe was caused to the student and the basis for your belief. (Attach information if needed)

Did you file a verbal report with the principal or designee on the same day of witnessing or receiving reliable information regarding the behavior being reported? \_\_\_ Yes \_\_\_ No

If no, explain why:

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I certify the information contained in the report is accurate and true to the best of my knowledge.

\_\_\_\_\_  
Signature of Person Making Report

\_\_\_\_\_  
Position (staff member/parent/pupil, etc.)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Person Receiving Report  
Date

\_\_\_\_\_  
Title