

Monroe Public Schools
Report of Bullying/Teen Dating Violence Form

Student Reported as Victim:	Date of Incident:
Student Reported as Committing Act:	Time of Incident:
School: <input checked="" type="checkbox"/> Check One	
<input type="checkbox"/> Masuk High School <input type="checkbox"/> Jockey Hollow <input type="checkbox"/> Fawn Hollow Elementary <input type="checkbox"/> Stepney Elementary	
<input type="checkbox"/> Monroe Elementary <input type="checkbox"/> Alternative High <input type="checkbox"/> STEM Academy	
Location of Incident: <input checked="" type="checkbox"/> Check One	
<input type="checkbox"/> Hallway <input type="checkbox"/> Classroom <input type="checkbox"/> Restroom <input type="checkbox"/> Lunch Room <input type="checkbox"/> Playground <input type="checkbox"/> Locker Room <input type="checkbox"/> Bus Stop	
<input type="checkbox"/> On Bus <input type="checkbox"/> Parking Lot <input type="checkbox"/> To/From School <input type="checkbox"/> School Sponsored Event <input type="checkbox"/> Gym	
<input type="checkbox"/> After School Program <input type="checkbox"/> Text/Phone/Internet/Social Media <input type="checkbox"/> Other _____	
Reporter Information:	
Anonymous student report <input type="checkbox"/>	
Staff Member report <input type="checkbox"/> Name _____	
Parent/guardian report <input type="checkbox"/> Name _____	
Student report <input type="checkbox"/> Name _____	
Bullying Behaviors: <input checked="" type="checkbox"/> Check One	
<input type="checkbox"/> Shoved/Pushed <input type="checkbox"/> Hit, Kicked, Punched <input type="checkbox"/> Threatened <input type="checkbox"/> Excluded <input type="checkbox"/> Hand Drawings/Cartoons/Notes	
<input type="checkbox"/> Stole/Damaged Possessions <input type="checkbox"/> Taunting/Ridiculing <input type="checkbox"/> Writing <input type="checkbox"/> Told Lies/False Rumors	
<input type="checkbox"/> Staring/Glaring <input type="checkbox"/> Inappropriate Touching <input type="checkbox"/> Demeaning Comments <input type="checkbox"/> Intimidation	
<input type="checkbox"/> Cyber-bullying using Text Messages/Website/Email/Other <input type="checkbox"/> Racial/Sexual/Religious/Disability	
Other _____	

