



Wachusett Regional School District

Holden, Paxton, Princeton, Rutland, Sterling

Bullying, Cyber Bullying, and Retaliation Incident Referral Form

Thank you for taking a few minutes to fill out this form. Our intent is to take all bullying reporting incidents seriously and to investigate them immediately. No disciplinary action will be taken against a student solely on the basis of an anonymous report, however please be advised that making a **knowingly false report** may result in disciplinary consequences.

This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act, 20 U.S.C. 1232g.

1. Name of Reporter: _____ (please print)

I would like to remain anonymous

2. Date of filing of this report _____

3. Date of Incident _____

4. What type of incident was this? Bullying Cyber Bullying Online (texting / cell phone)

5. Where did the incident take place: on school property on a school bus at a bus stop
 at a school sponsored activity/event Other _____

6. Please tell us who you are: Student Parent Other (specify) _____

Teacher Administrator

7. If student, state your school: _____ Grade _____ Homeroom _____

8. If staff, state your school or work site: _____

9. To the best of your knowledge, did a physical injury result from this incident?

Yes No Not Sure

10. Information about the Incident:

Name of target (person who was bullied): _____ Check whether: Student Staff Other

Name of the aggressor person who is bullying) _____ Student Staff Other

Name of any witnesses: _____ Student Staff Other

_____ Student Staff Other

Describe what you know about this incident on the back side of this form. (Please be as specific as possible)
After you have completed this form, please submit it to a school administrator.

Jefferson School

1745 Main Street, Jefferson, MA 01522

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www.wrsd.net