

**MONTVILLE PUBLIC SCHOOLS  
MONTVILLE, CONNECTICUT**

**BULLYING/HARASSMENT REPORT FORM (PARENT/GUARDIAN/STUDENT)**

The Montville Board of Education promotes a secure and positive school climate, conducive to teaching and learning that is free from threat, harassment and any type of bullying behavior. Therefore, it shall be the policy of the Board that bullying of a student by another student is prohibited.

Bullying as defined in P.A. 08-160 and Board of Education Policy 5131.9 refers to any overt acts by a student or groups of students directed against another student with the intent to ridicule, harass, humiliate or intimidate the other student while on school grounds, at a school sponsored activity, on a school bus, or over the internet which acts are committed more than once against any student during the school year. Bullying which occurs outside of the school setting may be addressed by the school officials if it has a direct and negative impact on the student's academic performance or safety in school.

Complainant: *(student reports may be anonymous)* \_\_\_\_\_

Describe relationship to alleged victim(s)/bully(ies): \_\_\_\_\_

Home Address: \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date(s) of alleged incidents: \_\_\_\_\_

Location(s) of alleged incidents: \_\_\_\_\_

Name(s) of alleged bully(ies): \_\_\_\_\_

Name(s) of alleged victim(s): \_\_\_\_\_

List any witness(es): \_\_\_\_\_

Describe the incidents as clearly as possible, including such things as: what force or physical contact, if any was used and any verbal statements such as threats, requests, demands, etc. *(Attach additional pages if more space is needed.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the information I have provided in this complaint is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Complainant Signature

Date: \_\_\_\_\_

Received by: \_\_\_\_\_

Date: \_\_\_\_\_