

Brigantine Community School

BULLYING, HARRASSMENT, OR INTIMIDATION REPORTING FORM

New Information for a Prior Report

Original Incident # _____

Today's Date: _____

1. Name of Reporter/Person Filing the New Information Report: _____
2. Check whether you are the: ___ Target of the Behavior ___ Reporter (not the target)
3. Check whether you are the: ___ Student ___ Parent ___ Administrator
 ___ Other (specify) _____
 ___ Staff Member (role and school) _____

Your contact information/phone number(s)/ e-mail: _____

4. Summary of New Information:

5. Witnesses (List people with new information)
Name: _____ ___ Student ___ Staff ___ Other _____
Name: _____ ___ Student ___ Staff ___ Other _____
Name: _____ ___ Student ___ Staff ___ Other _____
Name: _____ ___ Student ___ Staff ___ Other _____

6. Signature of Person Providing New Information _____ Date: _____

7. Disposition-Completed Report Should be given or sent to the building Principal where the target attends.
Receiving Principal's Signature _____ Date: _____

FOLLOW-UP INVESTIGATION

8. Investigator: _____ Position: _____

9. Re-Interview

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____

10. Summary of Investigation:



