Brockton Public Schools
Incident Report of Potential Bullying or Retaliation
For Students, and Parents
(please print)

Today’s date: ________________  School: ________________

Name of student target/victim: ____________________________  Grade: ________________

Name of alleged aggressor/offender(s): _____________________  Grade: ________________

On what date(s) did the incident happen? ____________________

Where did the incident happen (choose all that apply)?

☐ On school property  ☐ At a school-sponsored activity or event off school property  ☐ At bus stop
☐ On a school bus  ☐ On the way to/from school  ☐ On computer/cell
☐ On computer/cell
☐ Phone or electronic device

Place an X next to the statement(s) that best describes what happened (choose all that apply):

☐ Teasing  ☐ Threat  ☐ Stalking  ☐ Theft  ☐ Cyber bullying
☐ Social exclusion  ☐ Intimidation  ☐ Physical violence  ☐ Public humiliation

What did the alleged aggressor/offender(s) say or do? (Attach a separate sheet if necessary.)

Did a physical injury result from this incident?  No  Yes- please explain:

Was the target/victim absent from school as a result of this incident?  No  Yes

Additional Information:

Name of person reporting the incident (this can be reported anonymously): ____________________________

Please indicate how you know about the incident (circle one):  I witnessed it  I heard about it from:

Your telephone number: ____________________________  Your email address: ____________________________

Your relationship to the target/victim: __________________________________________________________

Signature: ____________________________  Date: ____________________________

Please return this form to your school principal’s office