

Today's date:	
Report completed by:	

Bullying/Harassment Form

Type: Cyber-bullying Bullying/Harassment				
Person(s) reporting the incident:		Person(s) involved in the incident:		
Name	Year Level	Name	Year Level	
Details of incident 1. Where it occured?				
2. When it occured?				
3. How long has it been happening?				
4. Has it been reported before?				
☐ Yeswho to?		□ No		
Further details:		— ⊔		
5. Choice of action: (please choose)				
☐ YLC/teacher formally speaks to offend	dor(s) Pullyi	ing/Harassmont Stons		
YLC/teacher facilitates a formal meet	ting with all p	eople involved → Bullying/Haras	sment Stops	
Counselling Session organised				
Other				
Details: (to be filled in by YLC- can incluissued, etc)	ide details tro	om inferview with offender(s), the	e consequences	
YLC Use Only – Check List				
☐ Email caregroup teacher and cl				
☐ Upload form to SEQTA and place☐ Contact parents	- naracopy Ir			