

Anti-Bullying Record Sheet

Please complete as much information as possible to note an accurate account of the incident.

# General details

Date and time of alleged incident: Location: Who reported it to you? What is the bullying behaviour suspected (e.g. cyber, exclusion, extortion, gesture, physical, verbal):

Description of what happened:

# Who is involved (record of people alleged to be involved)?

Person responsible for bullying behaviour: Target of bullying behaviour: Backup and audience:

# Record the responses from those involved

Who spoke about it? Feelings of individuals involved: (identify how the issue made them feel and any suggestions/fears expressed)

What action did you take?

Were the parents informed, and when?

What follow up is required (identify who should follow up and when)

Further action taken (note date and what follow up actions happened)

Form completed by:

Signature: Name: Date: