## Marysville Joint Unified School District Anonymous Bullying or Harassment Report Form

Complete this form if you have credible information regarding a bullying or harassment incident and want to report it anonymously. *Submit it to the school secretary or other school staff. You can also email the form to Jolie Carreon at jcarreon@mjusd.com.* This form is completely anonymous. Please type or print clearly.

School:		Report Date:	Report Time:
Alleged Victim's Name (last, first, middle)	Age:	Grade/Dept.	Gender/Race
Alleged Perpetrator's Name (last, first, middle)	Age:	Grade/Dept.	Gender/Race
Where did the incident occur? Be specific (i.e. classroom, hallway,	. cafeteria, playground	d, bus)	
When did the incident occur? Day: Date	e:	Time:	AM/PM
What happened? Describe in detail:			
Were there any witnesses? Yes No (Circle One) Provide the	heir name(s) and cont	act information below:	
List and attach any evidence of bullying or harassment. (i.e. letters	s, text, photo, etc.) _		
Was there a previous report filed by anyone regarding this inciden	nt? Yes No (Circle On	e) When?	
Was there a police report filed? Yes No (Circle One)	If so, when?		
Have you been bullied or harassed or witnessed bullying or harass	sment by this person I	pefore? Yes No (	Circle One)
If so, how many times? Was a report filed for the previou	ıs time(s)? Yes No (C	ircle one) When?	
This report will be investigated in a timely manner. If y staff member at your child's school or law enforcement		_	ger, contact a
Office Use:			
Findings:			
Investigator's Name:	Investigator's	Signature:	