

RIVER VALLEY SCHOOL DISTRICT

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660 West Daley Street

Spring Green, Wisconsin 53588

Phone: 608-588-2551

411.1 Exhibit 1 411.2 Exhibit 1

Bullying/Harassment Report (High School Online Form)

 Individual Reporting: (Recommended but not required. Your name will be kept confidential unless you agree otherwise.)

- 2. I am a:
- 3. Who is involved?
- 4. Please describe what happened/has been happening:

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- 5. Were there any direct witnesses? If so, who?
- 6. How long has the bullying/harassment occurred? Please list any specific dates if possible:
- 7. Where did the events occur?
- 8. Type of incident: (Please check all that apply) (1 required)
 - ____Verbal ____Physical ____Cyber/Electronic media ____Sexual ____Other
- 9. Have you talked to anyone about this prior to now? (1 required)
 - _____ Yes _____ No

10. If yes, who?

Counselor Parent or Guardian Principal Teacher Other

You will be contacted ASAP by a school official once this report is received.

APPROVED: October 9, 2014