

# HIB 338 Form Harassment, Intimidation, or Bullying (HIB) Mandatory Reporting Form 2022-23 School Year

# To Be Completed by Designated Local Educational Agency (LEA) Personnel

All allegations of HIB must be reported in writing and submitted to the principal within two school days from when a school employee or contracted service provider, witnesses or receives reliable information, that a student has been subject to HIB.

- The use of this form for reporting incidences of HIB is required.
- This form shall be completed even if a preliminary determination is made under the LEA's policy that the reported incident or complaint is a report outside the scope of the definition of HIB.
- Required investigative procedures shall continue after the submission of this form to the school principal.
- The completed form must be kept on file in the school.
- The principal must promptly submit a copy of this form to the superintendent.

### **Directions**

Complete the form below to provide detailed information of the alleged HIB incident. If fields are not applicable or if the completing party is uncertain of the response, those fields may be left blank.

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Form School Information		
School intol macion		
School District:		
School:		
Individual Completing Form		
If you prefer to remain anonymous, leave this section	ı blank.	
Name of individual completing this form:		
Role of individual completing the form		
(e.g., teacher, lunchroom monitor, school bus driver, etc.):		
Phone number:	Email address:	

# **Incident Information**

Incident date (mm/dd/yy):	Approximate time of the incident:
	(What was the incident? Who was involved in the incident? How d at the time of the incident? How did the incident occur?)
Specific incident location(s) (e.g., on the morning scho	ool bus, in the science wing hallway, online via social media, etc.)
Alleged Offender(s)	
Name(s) of alleged offender(s):	
Based on your knowledge, select all that apply about t	the alleged offender(s):
Alleged offender(s) attends the above-named so	chool.
Alleged offender(s) attends another school.	
Alleged offender(s) works for the school/schoo	l district.
Alleged offender(s) does not work for the school	ol/school district.
Alleged Victim(s)	
Name(s) of alleged victim(s):	
Based on your knowledge, select all that apply about t	the alleged victim(s):
Victim(s) attends the above-named school.	
Victim(s) attends another school.	

Witnesses
Complete this section with the names of any potential witnesses.
Student Names:
Staff Names:
Parent Names:
Other Names (specify title or position for each):
Alleged Bullying Behavior(s)
Select the statement(s) that best describes the alleged bullying behavior (Check all that apply).
Verbal (e.g., teasing, name calling, derogatory comments, etc.)
Emotional (e.g., group exclusion, spreading rumors, taking belongings, etc.)
Physical (e.g., hitting, pushing, inappropriate touching, etc.)
Electronic (e.g., attacking through social media, cyberbullying, offensive messaging, etc.)

# **School Principal/Designee and Superintendent Section**

To be Completed by School Principal/Designee and Superintendent

**Note:** The completed form must be kept on file in the school. The principal must promptly submit a copy of this form to the superintendent.

# **Utilization of Preliminary Determination Provision**

If the school district's policy permits the use of a preliminary determination for reports of HIB, question 1 and 2 below *must* be completed on every form. School districts who do not permit the use of a preliminary determination for reports of HIB should leave this section blank.

# **Question for the School Principal/Designee**

1.	Was a preliminary determination made not to initiate an HIB investigation because the reported incident or
	complaint is a report outside the scope of the definition of HIB?

Yes No

## **Question for the Superintendent**

2. If the answer to question 1 is yes, will you require the school principal/designee to initiate an HIB investigation based on the scope of the definition of HIB?

Yes No

## **Incident Tracking**

If your school district utilizes a tracking system to track alleged incidents of HIB, insert the incident number.

Incident number: