

**J. PAUL TAYLOR ACADEMY
BULLYING/HARASSMENT REPORT FORM**

STUDENT INFORMATION		
Name		ID#
Grade	Phone Number	Home Address
COMPLAINT FILED AGAINST		
Name		Grade (or position if not a student)
Name		Grade (or position if not a student)
INCIDENT		
Date		Time
Location		
Is this the first time this has happened? YES NO		
Is this the first time you are reporting this? YES NO		
DESCRIPTION - PROVIDE AS MUCH DETAIL AS POSSIBLE		
WITNESSES (IF APPLICABLE)		
Name	Grade/position	Phone number
Name	Grade/position	Phone number
Name	Grade/position	Phone number
REPORT INFORMATION		
Today's Date		
Did anyone help you fill out this form? YES NO		
If yes, who?		
OFFICE INFORMATION		
Who received this complaint form?		
Position		
Date Received		