Lake County Schools

Bullying or Harassment Anonymous Reporting Form

If you have information regarding a bullying or harassment act as defined in LCSB Policy 5.33 and Florida Statute 1006.147 and would like to report this information anonymously, please fill out the form below to the best of your knowledge and submit. If you fear a student is in IMMEDIATE danger, contact the student's school or law enforcement immediately!

The	following factors will determine if I	oullying or harassment for students and	employees falls within t	the scope of the Lake	County School District:	
	 During any school-related or institute. Notwithstanding th Board is not liable for such in Through the use of data or conscope of a public K-12 educated through the use of data or continued interferes with or limits the version. 	omputer software that is accessed at a relectronic device that is not owned, least ictim's ability to participate in or benefication process or orderly operation of a	r on a school bus or at a ying or harassment whill igate and refer to the ap ough a computer, componences chool-related locate sed, or used by a school it from the services, acti	a school bus stop of a e a student is at a sch opropriate agency; or uter system, or comp tion, activity, functior district or school, if t vities, or opportunition	uter network within the n, or program or through the bullying substantially es offered by a school or	
	Section	on Below to be Completed by Stude	ent, Employee, Paren	t, or Visitor		
Scho	and drop this form offool Site/Department	at least one of the factors within the at the designated school or worksit	te location.		nt, fill in information,	
	Victim Name (First, Middl		Sex (M or F)	Grade	Age	
	,	,	, ,			
	Accused Name (First, Middl	e, and Last)	Sex (M or F)	Grade	Age	
	Witness #1 Name (Fir	st, Middle, and Last)	Sex (M or F)	Grade	Age	
	Witness #2 Name (Fir	st, Middle, and Last)	Sex (M or F)	Grade	Age	
Date	e of Incident	Time of Incident(s)	Frequency of Incident(s)			
1.	Where/How did the incident happen (choose all that apply)? ☐ On school property ☐ At a school-sponsored activity ☐ At an event off campus ☐ On a school bus ☐ On the way to school ☐ On the way from school ☐ Electronically ☐ Internet ☐ E-mail ☐ Cell phone ☐ Wireless hand-held device ☐ During school ☐ At home ☐ Other electronic device ☐ ☐ Other					
2.	Which statement(s) best described Teasing ☐ Physical Violence ☐ Destruction of Property ☐ Sexual Harassment ☐ Disability Harassment	tatement(s) best describes what happened (choose all that apply)? ng				
3.	Describe what happened.					

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What :	Vhat steps have you already taken to resolve the situation?				
If witn	f witnesses are involved, describe their actions in this incident.				
Did this incident inflict physical hurt or psychological distress? If yes, how?					
	dent involves the use of data or computer software, nment? If yes, how?	did this incident adversely affect your educational or work			
Additi	onal supporting documentation and/or evidence				
	·	two (2) school days as it pertains to students s as it pertains to employees.			
	In-Take Documentation For School/Department Use Only				
Date	Received	Received By			
Date Given to Investigator		Name of Investigator			
Date	Investigation Initiated				
		nall be given to investigator within one (1) school day. nts/guardians of victim and perpetrator shall be made on same			
	Parent Name	Phone Number			
	Time of Contact If unable to speak with a parent, the school must contact Accused	Method of Contact act parent/guardian via mail.			
	Parent Name	Phone Number			
	Time of Contact If unable to speak with a parent, the school must contact	Method of Contact			

Next Step – Conduct investigation (conduct preliminary investigation first, if needed).