

Monmouth Regional High School

Harassment, Intimidation, or Bullying (HIB)* Referral Form

**For the purpose of this procedure, HIB is defined as any gesture; written, verbal, or physical act; or electronic communication that can reasonably be perceived as being motivated by specific characteristics, and has the effect of harming a student, insulting any student or group, interfering with the orderly operations of a school, or creating a hostile educational environment.*

Date of Incident: _____

Location: _____

Incident Description (please include any gesture, written act, physical act, or electronic communication)

Check all actual or perceived characteristics that were or may have been motivational factors in the alleged incident:

_____ Race _____ Color _____ Religion _____ Ancestry

_____ National Origin _____ Gender _____ Sexual Orientation _____ Gender Identity

_____ Mental or Physical or Sensory Disability

_____ Other actual or perceived characteristic (describe below)

Indicate how you learned that a student may have been the victim of HIB:

_____ Witnessed incident _____ Informed by alleged victim

_____ Informed by other person (Please list below)

_____ Anonymous Source

Please list any person who you believe or would have reason to believe may have relevant information, and whether that person is student, parent, staff member or other:

Identify what harm you believe was or may have been caused by the alleged incident. Check all that apply:

Physical or emotional harm

Insulting or demeaning

Creates a hostile educational environment

Interferes with student's education

Please add any pertinent information below or on a separate sheet.

Name : _____

Date: _____

Anonymous

Date: _____

(Anonymous reporting is intended as an option for parents or students, not by staff members)