

Anti-Bullying Record Sheet

Please complete as much information as possible to note an accurate account of the incident.

General details
Date and time of alleged incident:
Location:
Who reported it to you?
What is the bullying behaviour suspected (e.g. cyber, exclusion, extortion, gesture, physical, verbal):
Description of what happened:
Who is involved (record of people alleged to be involved)?
Person(s) responsible for bullying behaviour:
Target of bullying behaviour:
Other persons present:
Record the responses from those involved
Who spokeabout it?
Feelings of individuals involved (identify how the issue made them feeland any suggestions/fears
expressed)
What action did you take?
Were the parents informed, and when?
What follow up is required (identify who should follow up and when)?



Further action taken (note date and what follow up actions happened)	_
	_
Form completed by	
Signature:	
Name:	•
Date:	