



Parent Report Form



Name of school: _____ Date of incident: _____
_____ Time: _____

Name of person reporting incident: _____ Female Male

Phone number where you can be reached: (____) _____

E-mail address: _____

Alleged victim

Last name, first name: _____ Female Male

Group/Class: _____

Physical injury:

None Minor Severe

Alleged aggressor

Last name, first name of aggressor: _____ Female Male

Phone number where you can be reached: (____) _____

Level, Group/Class: _____

Last name, first name of student accomplice(s), if applicable:

Witness(es)

Last name, first name of witnesses:

Nature of incident

Of a physical nature

- Physical assault with fists or bare hands (fighting, punching, etc.)
- Physical assault with a firearm, knife, stick, chain, etc.
- Theft, extortion, threats (taxing)
- Other (specify): _____

Of a moral or psychological nature

- Humiliating
- Insulting, scolding
- Ridiculing, putting down
- Blackmailing
- Harassing, hounding
- Other (specify): _____
- Denigrating, mocking

Related to security

- Overall threat to anyone at school
- Raising false alarms (bomb threat, fire)
- Carrying a firearm, knife, etc.
- Other (specify): _____

Related to social activity

- Excluded, isolated, ignored
- Spreading rumors, gossip
- Ruining or damaging a reputation
- Other (specify): _____

Related to private life

- Filming or photographing someone without their knowledge and distributing it and/or posting it online
- Posting, sending or distributing a prejudicial message, photo or video

Discriminatory in nature

- Ethno-cultural Sexual orientation Gender Handicap Weight Size
- Personal hygiene Illness

Related to property

- Deliberately damaging personal or public property (graffiti, tags, etc.)
- Other (specify): _____

Site of incident

- Study areas (classroom, laboratory, gym, study room, library, etc.)
- Common areas (washrooms, canteen, schoolyard, etc.)
- Transition areas (corridors, stairs/lifts, changing rooms or lockers, etc.)
- Immediate school surroundings (parking lot, streets, lanes, parks, etc.)
- By digital means (email, text message, cellphone, social media)
- On the way to school
- School bus waiting areas, if applicable
- School buses, if applicable
- Other (specify): _____

Other information**Frequency of incident:**

- Isolated act
- Repeat incident

Context:

- Involved only one other
- Involved a group

Imbalance of power:

- YES NO

Did the victim feel threatened: YES NO

Comments:

Actions taken by the parent:

Form completed by: _____ Date
submitted: _____

Form submitted to: _____

Form received by: _____ Date received: _____