

## **Bullying Concern Form**

*This form is to be used following the completion of an Incident Report Form where bullying behaviour **has** been identified.*

*Please complete electronically and save in: Wdrive/KS1&2 tracking/select year group/select child/select behaviour/save.*

*A hard copy must go to Mr. Hill.*

### **Details of investigation**

**Form completed by:**

**Date:**

**Child's name & class:**

**Name/s of other children involved:**

**Summary of incident (including relevant previous history:**

**Section 1 Concern expressed by:**

- Child
- Teacher
- Lunchtimes supervisor
- Parent/carer

- Other (please specify)

**Section 2 Type of behaviour:**

- Name calling/teasing
- Threat
- Physical aggression
- Racist name calling/teasing
- Damage to/taking of possessions
- Extortion
- Deliberately excluding
- Spreading rumours/sending notes
- Misuse of text messaging/other social networks

**Section 3 Location:**

- Classroom
- Toilets
- Corridor
- Cloakroom
- Hall
- Playground
- Other (please specify)

**Section 4 Time:**

- Am before start of school
- Am during lesson time
- Am break
- Am lesson time after break
- Lunchtime
- Pm lesson time
- Pm home time

**Section 5 Role:**

- Victim
- Witness
- Bystander
- Ringleader
- Assistant

**Section 6 Frequency:**

- Once or twice
- Several times during half term
- Persistently throughout half term

- Persistently for more than a term
- Previous history between children

**Action take/sanction/outcome:**

**Date set for follow up:**