

HIB 338 Form Harassment, Intimidation, or Bullying (HIB) Mandatory Reporting Form 2023-2024 School Year

To Be Completed by Designated Local Educational Agency (LEA) Personnel

To be filled out by Principal or Designee

Date and Time Received:

Incident # (optional):

All allegations of HIB must be reported in writing and submitted to the principal within two school days from when a school employee or contracted service provider, witnesses or receives reliable information, that a student has been subject to HIB. A written statement from the alleged victim or other evidence may be attached to the back of this HIB 338 Form (e.g., screenshot, text thread, etc.).

- The use of this form for reporting incidences of HIB is required.
- This form shall be completed even if a preliminary determination is made under the LEA's policy that the reported incident or complaint is a report outside the scope of the definition of HIB.
- Required investigative procedures shall continue after the submission of this form to the school principal.
- Principals are required to inform parents of all students involved in the alleged incident and keep a written record of the date, time, and manner of notification to parents.
- The completed form must be kept on file in the school.
- The principal must promptly submit a copy of this form to the superintendent.

Directions

Complete the form below to provide detailed information of the alleged HIB incident. If fields are not applicable or if the completing party is uncertain of the response, those fields may be left blank.

School Information

School District:

School:

Individual Completing Form

Name of individual completing this form:

Role of individual completing the form
(e.g., teacher, lunchroom monitor, school bus driver, etc.):

Phone number:

Email address:

Incident Information

Incident date (mm/dd/yyyy):

Approximate time of the incident:

Describe the incident with as much detail as possible. (What was the incident? Who was involved in the incident? How you were made aware of the incident? What happened at the time of the incident? How did the incident occur?)

Specific incident location(s) (e.g., on the morning school bus, in the science wing hallway, online via social media, etc.)

Alleged Offender(s)

Name(s) of alleged offender(s):

Based on your knowledge, select all that apply about the alleged offender(s):

Alleged offender(s) attends the above-named school.

Alleged offender(s) attends another school.

Alleged offender(s) works for the school/school district.

Alleged offender(s) does not work for the school/school district.

Alleged Victim(s)

Name(s) of alleged victim(s):

Based on your knowledge, select all that apply about the alleged victim(s):

Victim(s) attends the above-named school.

Victim(s) attends another school.

Witnesses

Complete this section with the names of any potential witnesses.

Student Names:

Staff Names:

Parent Names:

Other Names (specify title or position for each):

Alleged Bullying Behavior(s)

Select the statement(s) that best describes the alleged bullying behavior (Check all that apply).

Verbal (e.g., teasing, name calling, derogatory comments, etc.)

Emotional (e.g., group exclusion, spreading rumors, taking belongings, etc.)

Physical (e.g., hitting, pushing, inappropriate touching, etc.)

Electronic (e.g., attacking through social media, cyberbullying, offensive messaging, etc.)

Signature

Signature of Person Completing this HIB 338 Form:

Date:

School Principal/Designee and Superintendent Section

To be Completed by School Principal/Designee and Superintendent

Note: The completed form must be kept on file in the school. The principal must promptly submit a copy of this form to the superintendent.

Utilization of Preliminary Determination Provision

If the school district's policy permits the use of a preliminary determination for reports of HIB, question 1 and 2 below *must* be completed on every form. School districts who do not permit the use of a preliminary determination for reports of HIB should leave this section blank.

1. Question for the School Principal/Designee

Was a preliminary determination made not to initiate an HIB investigation because the reported incident or complaint is a report outside the scope of the definition of HIB? Check one below and submit this form to the Superintendent.

Yes - Follow your school district's policies for other reports (e.g., code of student conduct, referral to counseling services, etc.)

No- Refer to your school district's HIB policy for initiating an HIB investigation.

Comments (Optional):

2. Questions for the Superintendent

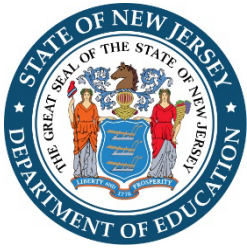
If the answer to question 1 is yes, will you require the school principal/designee to initiate an HIB investigation based on the scope of the definition of HIB? Check one and proceed as directed.

Yes- Notify the principal of this determination in writing and direct the principal to initiate an HIB investigation per the district's policy.

No- Follow your school district's policies for other reports (e.g., code of student conduct, referral to counseling services, etc.) and maintain a copy of this form.

If the answer to question 1 is no, follow your school district's policies for HIB investigations and maintain a copy of this form.

Comments (Optional):



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To Be Completed by Families / Caregivers

To be filled out by Principal or Designee

Date and Time Received:

Incident # (optional):

This form should be used by parents or guardians to report allegations of HIB. A written statement from the alleged victim or other evidence may be attached to the back of this HIB 338 Form (e.g., screenshot, text thread, etc.). Once the form is received by the school, the principal is responsible for implementing the school district's policy and procedures. An investigation shall be completed as soon as possible, but not later than 10 school days from the date of the written report of the incident. Should you have any questions about the investigation, please contact the school principal.

Directions

Complete the form below to provide detailed information of the alleged HIB incident. If some fields are not applicable or if you are uncertain of the response, you may skip those fields. This form may be submitted anonymously.

School Information

School District:

School:

Individual Completing Form

If you prefer to remain anonymous, leave this section blank. Individuals filling out this HIB 338 Form as an anonymous reporter may consider adding their name as a witness on page 2.

Name of individual completing this form:

Relation to individual involved in alleged incident of HIB
(e.g., parent, guardian, grandparent, etc.):

Phone number:

Email address:

Incident Information

Incident date (mm/dd/yyyy):

Approximate time of the incident:

Describe the incident with as much detail as possible. (What was the incident? Who was involved in the incident? How you were made aware of the incident? What happened at the time of the incident? How did the incident occur?)

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Staff Names:

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Other Names (specify title or position for each):

Signature

Signature of Person Completing this HIB 338 Form:

Date:

School Principal/Designee and Superintendent Section

To be Completed by School Principal/Designee and Superintendent

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Comments (Optional):