



# RUSH SPRINGS PUBLIC SCHOOLS I-O68

PO Box 308 \* 601 W. Blakely \* Rush Springs, OK 73082

*Home of the Redskins*

## BULLYING, HARASSMENT, OR INTIMIDATION REPORTING FORM

*This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act*

**DIRECTIONS:** Bullying, harassment, and intimidation are serious and will not be tolerated. This is a form to report alleged bullying, harassment, or intimidation that occurred during the current school year on school property, at a school-sponsored activity, or event off school property, on a school bus; on the way to and/or from school; on the internet, sent on or off school property, that substantially disrupted the orderly operation of the School. Bullying, harassment, and intimidation mean any intentional conduct --- including verbal, physical, or written conduct, or an intentional electronic communication -- that creates a hostile educational environment by substantially interfering with a student's educational benefits, opportunities, or performance, or a student's physical or psychological well being. Conduct of a sexual nature is the most commonly reported form of sexual harassment. This term is generally thought to mean actions, language, or visual materials which specifically refer to, portray or involve sexual activity or language. Conduct of a sexual nature may include overt sexual solicitations, inappropriate touching, sexual jokes and inquiries about a person's sex life. Sexual harassment is the broader term that encompasses conducts of a sexual nature such as unwelcomed sexual advances, requests for sexual favors, and other verbal or physical contact of a sexual nature. Sexual harassment also includes acts that are not overly sexual but rather are directed at individuals based on their gender such as profanity or rude behavior that is gender specific.

If you are a student, the parent/guardian of a student, a close adult relative of a student, or school staff member and wish to report an incident of alleged bullying harassment, or intimidation, complete this form and return it to the principal at the student's school. Contact the school for additional information or assistance at any time.

### PLEASE PRINT ALL INFORMATION

Today's Date: \_\_\_\_\_ School Name and Building: \_\_\_\_\_

<p><b>PERSON REPORTING INCIDENT</b></p> <p>Name: _____</p> <p>Telephone: _____</p> <p>Email: _____</p>	<p><b>Place an X in the appropriate box:</b></p> <p><input type="checkbox"/> Student</p> <p><input type="checkbox"/> Parent/Guardian of Student</p> <p><input type="checkbox"/> Close adult relative of a student</p> <p><input type="checkbox"/> School staff</p> <p><input type="checkbox"/> Bystander</p>
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Name of Student Victim(s)	Age/Grade	School
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Robbie Burch**  
Superintendent  
(580) 476-3929  
Fax(580)476-2018

**Carl Gaebler**  
H.S. Principal  
(580) 476-3596  
Fax(580)476-2018

**Corey Blough**  
M.S. Principal  
(580) 476-3447  
Fax(580)476-2131

**Mickey Seifried**  
Elem Principal  
(580) 476-3172  
Fax(580)476-3777



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Name of alleged witness(es) (if known)

Age/Grade

School

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of alleged offender(s) (if known)

Age/Grade

School

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

On what date(s) did the incident happen?

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Place an X next to the statement(s) that best describes what happened. (Check all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Any bullying, harassment, or intimidation that involves physical aggression                 | <input type="checkbox"/> Related to the student's perceived sexual orientation  |
| <input type="checkbox"/> Getting another person to hit or harm the student   | <input type="checkbox"/> Cyberbullying (e.g. social media including Facebook, Twitter, Vine, Instagram, Tik Tok, etc) |
| <input type="checkbox"/> Teasing, name-calling, making critical remarks, or threatening, in person or by other means | <input type="checkbox"/> Electronic communication (e.g. email, text messaging, etc.)<br>_____                         |
| <input type="checkbox"/> Demeaning and making the victim of jokes  | <input type="checkbox"/> Gang related   |
| <input type="checkbox"/> Making rude and/or threatening gestures   | <input type="checkbox"/> Gang recruitment   |
| <input type="checkbox"/> Excluding or rejecting the student  | <input type="checkbox"/> Human trafficking / Prostitution recruitment   |
| <input type="checkbox"/> Intimidating (bullying), extorting, or exploiting   | <input type="checkbox"/> Racial harassment  |
| <input type="checkbox"/> Spreading harmful rumors or gossip  | <input type="checkbox"/> Sexual harassment  |
| <input type="checkbox"/> Related to the student's disability   | <input type="checkbox"/> Sexual in nature   |
|  | <input type="checkbox"/> Other (specify) _____  |

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Where did the incident happen? (Check all that apply)

- On school property
- On a school bus
- Via Internet - sent on or off school property
- At a school-sponsored activity or event off school property
- On the way to/from school

Describe the incident(s), including what the alleged offender(s) said or did. (Attach a separate sheet if necessary)

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Why did the bullying, harassment, or intimidation occur? (Attach a separate sheet if necessary).

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Did a physical injury result from this incident? (Place an X next to one of the following)

- No
- Yes, but did not receive medical attention
- Yes, and it did require medical attention

If there was physical injury, do you think that there will be permanent effects? (Circle One) YES NO

Was the student victim absent from school as a result of the incident? (Circle One) YES NO  
If yes, how many days was the student victim absent from school as a result of the incident? \_\_\_\_\_

Is there any additional information that you would like to provide? (Attach a separate sheet if necessary)

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Any statements or reports given that are found to be false or fabricated will be subject to consequences determined by the administration.*

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