



# ARCHDIOCESE OF WASHINGTON

Archdiocesan Pastoral Center: 5001 Eastern Avenue, Hyattsville, MD 20782-3447  
Mailing Address: Post Office Box 29260, Washington, DC 20017-0260  
301-853-4500 TDD 301-853-5300

## Bullying Report Form

Name of School: \_\_\_\_\_

Name(s) of Victim: \_\_\_\_\_  
\_\_\_\_\_

Name(s) of Bully: \_\_\_\_\_  
\_\_\_\_\_

Name(s) Witness: \_\_\_\_\_

Circle all that apply: Shove/Pushed Hit/Kick/Punched Threatened

Rumor Spreading Stolen/Damaged Possessions Teasing Extortion

Name Calling Cyber Other: \_\_\_\_\_

Describe what occurred – including dates and times of the incident(s):

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

Attach Additional Narrative Pages If Needed Circle any of the following items of evidence available: Pictures Notes/Writings Recordings Medical Reports The above information is true to the best of my knowledge, and I understand this report may be used as a part of a formal investigation.

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

Contact Information (i.e., email, phone #): \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Catholic Schools Office

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