

# Woodstown-Pilesgrove Regional Public Schools

## HIB Report Form

**Directions:** The Woodstown-Pilesgrove Regional Public School Board of Education, Administration and employees expect all students to treat each other with civility and respect and not to engage in behavior that is disruptive or violent. The board expects students to conduct themselves in keeping with their level of maturity, with a proper regard for the rights and welfare of other students, for school personnel, for the educational purpose underlying all school activities, and for the care of school facilities and equipment. Behavior which does not align to these beliefs is not acceptable.

This is a form to report alleged HIB. If in the completion of this form you believe you are not reporting HIB but still have a concern, please contact your child's school principal.

*HIB is defined as any gesture, any written, verbal or physical act, or any electronic communication, whether it be a single incident or a series of incidents, that is reasonably perceived as being motivated either by any actual or perceived characteristic, such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identity and expression, or a mental, physical or sensory (handicap) disability, or by any other distinguishing characteristic that takes place on school property, at any school sponsored function, on a school bus, or off school grounds that substantially disrupts or interferes with the orderly operation of the school or the rights of other students.*

Bullying, harassment, or intimidation are serious and will not be tolerated.

Please provide further detail below:

Date of incident \_\_\_\_\_

Person completing form \_\_\_\_\_ Relationship to student \_\_\_\_\_

Name(s) of students involved

\_\_\_\_\_

\_\_\_\_\_

What happened?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where did this happen? \_\_\_\_\_

When did this happen? (Date and time) \_\_\_\_\_

Has this happened before? (Circle One) Yes No

Was this incident motivated by any actual or perceived characteristic described in the HIB definition above?  
(Circle One) Yes No

If you answered yes above, please indicate which characteristic/category? (Circle all that apply)

Race Color Religion Ancestry National Origin Gender Sexual Orientation

Gender Identity and Expression Mental, Physical, or Sensory Disability Other \_\_\_\_\_

\_\_\_\_\_  
Signature of person completing form

\_\_\_\_\_  
Date

When complete, please give this document to the school principal