

**The Saints Academy**  
**Beverly, MA**

**Incident Report**

Date of Report \_\_\_\_\_

Time of Incident \_\_\_\_\_

Type of Incident:

Bullying                      Cyber bullying  
Retaliation                  Harassment

Person reporting incident:

Student / Teacher / Parent / Counselor / Nurse / Support Staff / Other

Name(s) of Target:

\_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_

Name(s) of Alleged Aggressor(s):

\_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_

Describe the incident that is being reported or witnessed. Please be thorough and provide specific details. Attach extra paper if necessary.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name(s) of Witnesses (if any):

\_\_\_\_\_ Grade \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_