

1 time

2 times

Real Bulldogs Don't Bully!



Your Name			Date						
Grade (Circle one) K	1	2	3 Tea	acher				
Name of the pers	on whc	was	bullie	d					
Name of the pers	on(s) w	vho bı	ullied	them					
Were you (Circle *An upstander st	•		-				•	•	
 What happened? (Circle all that apply) Name calling Pushing Excluded (left out) Hitting/Punching 						•	ThreatsKickingRumors/gossip (untrue stories)Other		
Draw or write w	nat hap	pene	d in t	ne box b	elow				
Where did the bu	llying h	ıappeı	n? (Ci	rcle all th	nat apply)				
Hallway	Clas	sroom	1	Caf	feteria		Bathroom	Gym	Other
Bus/Bus	Stop			Online		Pla	yground	Cell Phone	
How many times	has this	s hap	pened	l? (circle	one)				

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4 or more times

3 times

WEST YORK AREA SCHOOL DISTRICT

ADMINISTRATIVE REGULATION - 248.4

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<mark>1)</mark> -
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Copies of this response form AND the student report (and any office discipline forms should they be necessary) should be placed in the student files (principal files) of ALL students involved in the situation.

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