

# Bullying and Harassment

## Reporting Form

Date of incident: .....

Date of report: .....

**Please tell us your name if you have been bullied or hurt:**



My name is:.....

**Please tell us your address**



Number / House Name: .....

Road: .....

Town: .....

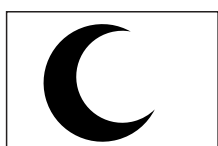
County: ..... Postcode: .....



My telephone number is:



Day time: .....

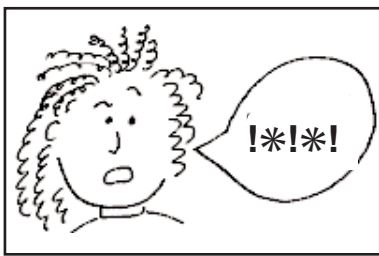
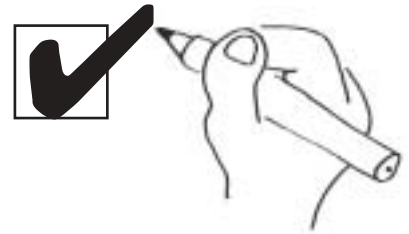


Evening time: .....

# Tell us about it?

## Part 1 - What happened to you?

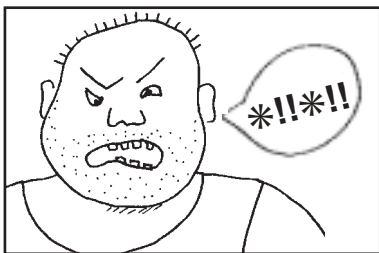
To tell us about what happened, answer the questions by ticking the right boxes.



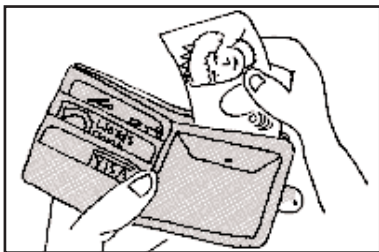
I was called names.



I had people laugh at me.



I was sworn at.



I had something stolen.



I was hit or kicked or touched in a way I didn't like.

# Tell us about it?



I had something thrown at me.



I had something thrown at my house.

## Part 2: Who did this to you?



One person.



Two People.



A Group of people.



Was it a man?

# Tell us about it?

## Part 2: Who did this to you?



Was it a woman?



Were there both men and women?



Were they adults?



Were they teenagers?



Were they Children?

Do you know their names?

Yes

No

If you do, what are their names? .....

.....

# Tell us about it?

## Part 2: Who did this to you?



Do you know where they live?

Yes

No



Have they done this before?

Yes

No

Can you give a description of the person or people that did this?

Did they wear glasses  
Yes  No



Hair colour  
.....

Skin colour  
.....

Is there anything else you can tell us about them? .....

.....

.....

Did anyone else see this happen? Yes

No

Who were they? .....

## Part 3: Where Did It Happen?



On the Street?



In the Park?

Which Street? .....

Which Park? .....

# Tell us about it?

## Part 3: Where Did It Happen?



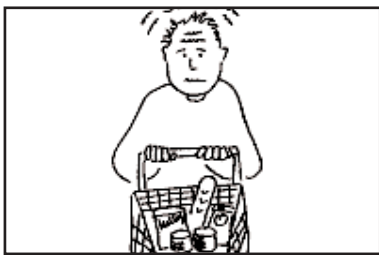
The cinema / theatre

Which cinema / theatre? .....



The Pub

Which Pub? .....



The Shops

Which Shops? .....



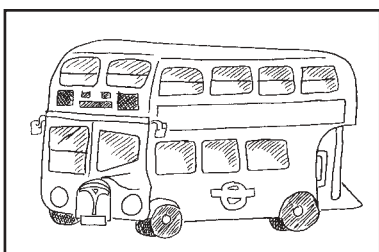
The Sports Centre

Which Sports Centre? .....



At the bus stop

Which bus stop? .....

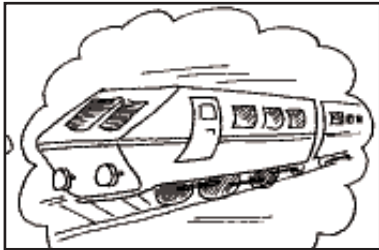


On the bus

Which bus? .....

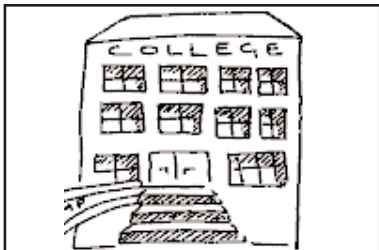
# Tell us about it?

## Part 3: Where Did It Happen?



On the train or at the station

Which train or at which station?  
.....



At College

Which College? .....



At a Day Centre

Which Day Centre? .....



At Home



At work



Any other place?  
.....

# Tell us about it?

## Part 4: When Did It Happen?

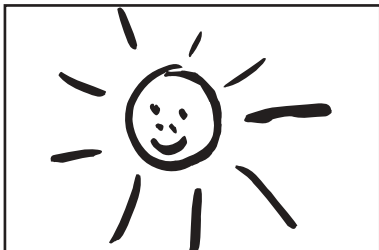


Time of incident

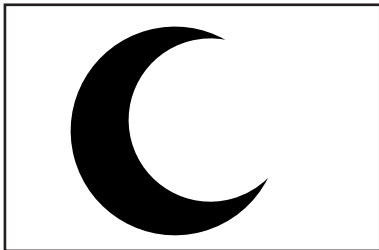


What was the date

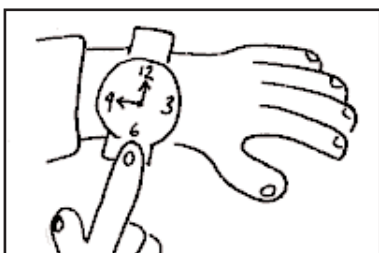
.....



Day time



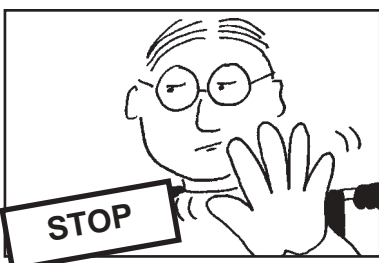
Evening / Night time



What was the time

.....

## Part 5: What have you done about the bullying



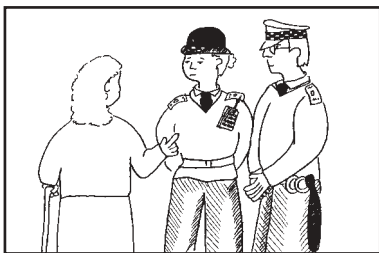
I told the bully to stop.

# Tell us about it?

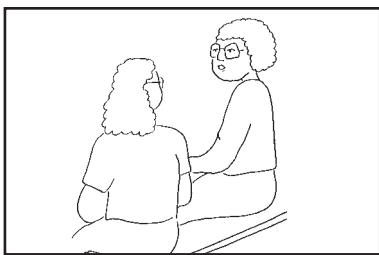
## Part 5: What have you done about the bullying



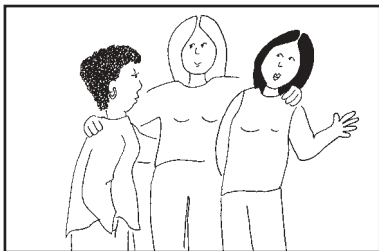
I ignored it.



I told police



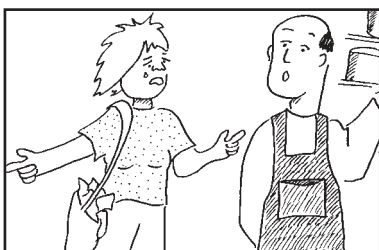
I told a friend



I told a member of my family



I told my key worker or another member of staff



I have told somebody else.

Who did you tell.....

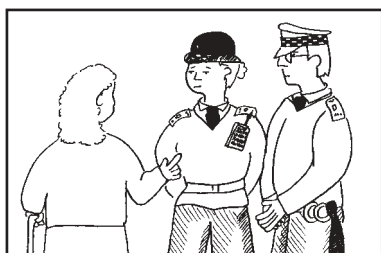
.....

# Tell us about it?

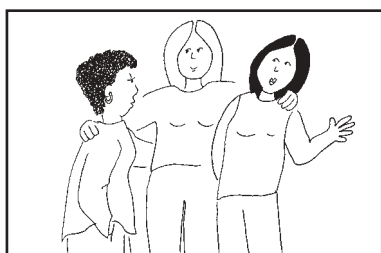
Is there anyone else you want to tell



Victim Support



The Police



A member of your family

Or anyone else you can think of that you would like to know? .....

.....

.....



Is there anyone that you do NOT want to be told about this?

.....

.....

.....

# Further Information

Is anyone helping you to fill in this form?:

Yes

No

**If you tick the No box - Please take or post this form to your local Police Station or hand it to the person that supports you. You may want to keep a copy of this form.**

If yes, can you ask them to fill in the rest of the form (*see guidance notes*)

Name: .....

Occupation: .....

Address: .....

.....

.....

.....

Telephone Number: .....

Fax Number: .....

E-mail: .....

What action have you taken so far? .....

.....

.....

.....

.....P.T.O.

.....

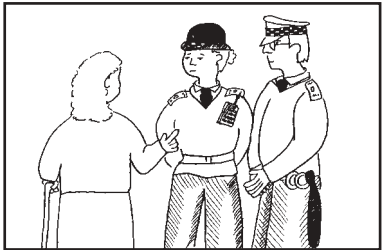
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.....



**Please take this form to the local  
Police Station.  
The person who supports you can  
help you do this.**



**You may want to keep a copy  
of this form for yourself.**



**HERTFORDSHIRE  
CONSTABULARY**

