

Report Form

Princess Elizabeth Elementary School

PARENTS

	_	
Date of incident:	Time:	
Name of person reporting incident:		☐ Male
Phone number where you can be reached: ()		
Alleged victim		
Last name, first name:	☐ Female	☐ Male
Group/Class:		
Physical injury:		
□ None □ Minor	☐ Severe	
Alleged aggressor		
Last name, first name of aggressor:		☐ Male
Phone number where you can be reached: ()		
Level, Group/Class:		
Last name, first name of student accomplice(s), if applic	cable:	
Witness (es)		
Last name, first name of witnesses:		
Nature of incident		
Of a physical nature		
\square Physical assault with fists or bare hands	\square Physical assault with a firearm,	knife, stick,
(fighting, punching, etc.)	chain, etc.	
☐ Theft, extortion, threats (taxing)	☐ Other (specify):	
Of a moral or psychological nature	_	
☐ Humiliating	☐ Harassing, hounding	
☐ Ridiculing, putting down	☐ Denigrating, mocking	



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☐ Insulting, scolding	\square Other (specify):
☐ Blackmailing	
Related to security	
☐ Overall threat to anyone at school	\square Raising false alarms (bomb threat, fire)
☐ Carrying a firearm, knife, etc.	☐ Other (specify):
Related to social activity	
☐ Excluded, isolated, ignored	☐ Spreading rumors, gossip
☐ Ruining or damaging a reputation	☐ Other (specify):
Related to private life	
☐ Filming or photographing someone without their k online	nowledge and distributing it and/or posting it
☐ Posting, sending or distributing a prejudicial messa	age, photo or video
Discriminatory in nature	
\square Ethnocultural \square Sexual orientation \square Gender	□ Handicap □ Weight □ Size
☐ Personal hygiene ☐ Illness	_ manareap _ weight _ end
Related to property	
☐ Deliberately damaging personal or public property	(graffiti, tags, etc.)
□ Other (specify):	
•	
Site of incident	
☐ Study areas (classroom, laboratory, gym, study roo	m, library, etc.)
☐ Common areas (washrooms, canteen, schoolyard, e	
☐ Transition areas (corridors, stairs/lifts, changing ro	
☐ Immediate school surroundings (parking lot, street	s, lanes, parks, etc.)
☐ By digital means (email, text message, cellphone, so	ocial media)
\square On the way to school	
\square Security service office, if applicable	
\square School bus waiting areas, if applicable	
☐ School buses, if applicable	
☐ Other (specify):	

Other information of incident: Context: Imbalance of power:	\square Isolated act	☐ Repeat incident☐ Involved a group
Did the victim feel threat	ened:	
Actions taken by the parent	:	
Form completed by:		Date submitted:
	nom this form is submitted:	
Name of the person to wh		
Name of the person to wh	nom this form is submitted:	
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