



Heathfield Schools' Partnership

Bullying/Racist Incident Form

(delete as appropriate)

Alleged perpetrator's name/s (ethnicity and year group) *	Victim's name/s (ethnicity and year group) *

Description of incident (including time, place, what occurred and who witnessed it)

Actions taken (including informing parents)	
Victim/s	Perpetrator/s

Signed..... **Date**.....

** Please return a paper copy of the completed form to the Deputy Head who will complete the ethnicity and year group details.*