

**West Hills Intermediate School
Report a Concern**

1. **What is your concern (*i.e.*, student safety, bullying/harassment, drug issues, suicide)?**

2. **Your name (*not required*):** _____

3. **When and where did this happen?**

4. **Date of incident:** _____

5. **Time of incident:** _____

6. **Who was involved?**

7. **What happened?**

8. **Has this happened before?** _____

Please submit this completed form to the school office.