

TDS ANTI-BULLYING CHARTER 2019-20

Bullying is


“deliberate and hurtful behaviour, repeated over a period of time and in circumstances where it is difficult for those being bullied to defend themselves.”

Our Charter

‘At The Duston School, we will treat everyone with respect, whoever you are and wherever you come from.’



What to do if you witness bullying , or are being bullied.

- Tell a member of staff, who will encourage you to complete a Bullying Report Form . 
- These forms are available from your Tutor, Assistant Director of Year (ADoY), the Library and the Safeguarding Office (F06).
- Your tutor or ADoY will speak directly with all parties involved to ensure the appropriate action or sanction is taken to resolve your referral.
- All incidents reported will be revisited after a 4-week period, with reporting student(s) to ensure there are no further difficulties or ongoing issues.

BULLYING REPORT FORM		THE DUSTON SCHOOL
Bullying is: <i>‘Deliberate, hurtful behaviour repeated over a period of time and in circumstances where it is difficult for those being bullied to defend themselves.’</i>		
Name(s) of person(s) being bullied:		
Name of person completing the form:		
Year Group of person being bullied:	<input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12/13	
Type of Incident:	<input type="checkbox"/> Verbal <input type="checkbox"/> Physical <input type="checkbox"/> Cyberbullying <input type="checkbox"/> Gender <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity <input type="checkbox"/> Sexuality	
Did the bullying focus on any of the following?	<input type="checkbox"/> Disability <input type="checkbox"/> Pregnancy <input type="checkbox"/> Transgender	
Date of Incident:		
Date of Reporting:		
Time / Lesson / Out of School:		
Place incident took place:		
Details of Incident:		
Witness(es) were:		
Year Group:	<input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12/13	
Name(s) of alleged bully/bullies:		
Year Group of alleged bully/bullies:	<input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12/13	
<small>Duston School</small>		