

## Bullying Prevention Coordinating Committee Members

Write the names of your school's Bullying Prevention Coordinating  
Committee members in the spaces below.

Program Coordinator \_\_\_\_\_

School Administrator \_\_\_\_\_

Role/Job Title at School \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

Grade \_\_ Teacher \_\_\_\_\_

School Counselor or School-Based Mental Health

Professional \_\_\_\_\_

Non-teacher Staff Member \_\_\_\_\_

Role/Job Title at School \_\_\_\_\_

Parent \_\_\_\_\_

Community Representative \_\_\_\_\_

Role in Community \_\_\_\_\_

Additional Member \_\_\_\_\_

Additional Member \_\_\_\_\_

Additional Member \_\_\_\_\_