



BULLYWATCH QUIZ

SEE IF YOUR CHILD IS BEING A BULLY
TICK THE BOX YOU THINK FITS
DISCUSS WITH TEACHER
© DR. JEAN HEALEY

IS MY CHILD BEING A BULLY? CHILD'S NAME-----

Date:-----

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Have you been told on more than one occasion that your child is bullying others? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Does your child seem to lack empathy for others being hurt? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Does your child bring home goods and property that do not belong to them? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Sometimes has unexplained cash or 'goodies' | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Acts as a 'bossy-boots' both verbally and physically | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Seeks out certain peers or groups to tease or torment calling it 'playing' | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Speaks of others using mean or nasty words or names | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Gets into trouble at school for teasing or hurting others | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Is unhappy about school or at school because others wont spend time with them | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Has a 'gang' of friends who also get into trouble or who follow your child's instructions | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Seems to send text or email messages late into the night | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Is frequently given opportunities at school, sport etc to be 'in charge' of peers and excludes or abuses some | <input type="checkbox"/> | <input type="checkbox"/> |

A majority of 'yes' responses may indicate the child is bullying others.

Parent or guardian to sign-----