



BUTT HURT REPORT

DATA REQUIRED BY THE PRIVACY ACT OF 1974

PRINCIPAL PURPOSE: To assist whiners in documenting hurt feelings.

ROUTINE USES: Leaders & whiners should use this form as necessary

PART I - ADMINISTRATIVE DATA

A. WHINER'S NAME (Last, First, MI)	B. SOCIAL SECURITY NUMBER	C. DATE OF REPORT
D. ORGANIZATION		E. NAME & TITLE OF PERSON FILLING OUT THIS FORM

PART II - INCIDENT REPORT

A. DATE FEELINGS WERE HURT	B. TIME OF HURTFULNESS	C. LOCATION OF HURTFUL INCIDENT
D. NAME OF REAL MAN/WOMAN WHO HURT YOUR SENSITIVE FEELINGS		E. ORGANIZATION

E. INJURY *(Mark all that apply)*

1. WHICH EAR WERE THE WORDS OF HURTFULNESS SPOKEN INTO? <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT <input type="checkbox"/> BOTH	2. IS THERE PERMANENT FEELING DAMAGE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE
3. DID YOU REQUIRE A "TISSUE" FOR TEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MULTIPLE _____	4. HAS THIS RESULTED IN A TRAUMATIC BRAIN INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> MAYBE

F. REASON FOR FILING THIS REPORT *(Mark all that apply)*

<input type="checkbox"/> I am thin skinned	<input type="checkbox"/> Someone needs to fix my problems	<input type="checkbox"/> Two beers is not enough
<input type="checkbox"/> I am a wimp	<input type="checkbox"/> My feelings are easily hurt	<input type="checkbox"/> My hands should be in pockets
<input type="checkbox"/> I have woman/man-like hormones	<input type="checkbox"/> I didn't sign up for this	<input type="checkbox"/> I was not offered a post brief
<input type="checkbox"/> I am a crybaby	<input type="checkbox"/> I was told that I am not a hero	<input type="checkbox"/> Someone requested a post brief
<input type="checkbox"/> I want my mommy	<input type="checkbox"/> The weather is too cold/hot	<input type="checkbox"/> All of the above and more

G. NARRATIVE *(Tell us in your own sissy words how your feelings were hurt.)*

PART III - AUTHENTICATION

A. PRINTED NAME OF REAL MAN/WOMAN	B. SIGNATURE	C. PRINTED NAME OF WHINER	D. SIGNATURE
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