

Bullying, Harassment, Cyberbullying or Intimidation Reporting Form

Bullying, harassment, cyberbullying, or intimidation are serious and will not be tolerated. This is a form to report alleged bullying, harassment, cyberbullying, or intimidation that occurred on school property; at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school in the current school year. If you are a targeted student; parent/guardian of a targeted student; or a close adult relative of a targeted student or a school staff member and wish to report an incident of alleged bullying, cyberbullying, harassment or intimidation, complete this form and return it to the Principal and/or their designated representative at the targeted student's school. Contact the school for additional information or assistance at any time. The **Dignity for All Students Act (DASA)** was signed into law in September, 2010, to ensure that students throughout New York State attend school in a safe and supportive environment, free from discrimination, intimidation, taunting, harassment and bullying on school property, on school buses or at school functions.

Definition of Terms: Harassment/Bullying is defined as the creation of a hostile environment through actions or words that intimidate or are abusive. In addition, actions are considered harassment if they interfere - or have the potential to interfere - in a student's education or in a student's mental, emotional, or physical health and well-being.

Types of bullying, harassment, include:

Verbal - Name-calling, teasing, inappropriate sexual comments, taunting, threatening to cause harm.

Social - Spreading rumors about someone, excluding others on purpose, telling other people not to be friends with someone, embarrassing someone in public.

Physical - Hitting, punching, shoving, kicking, pinching, spitting, tripping, pushing, taking or breaking someone's things, making mean or rude hand gestures.

1. **Today's Date:** Month ____ Day ____ Year ____ School: _____

2. **Person Reporting Incident:**

___ Student ___ School Staff Member ___ Parent/Guardian

___ Student (Witness/Bystander) ___ Close Adult Relative)

Name of Person Reporting Incident: _____ Phone and/or E-mail: _____

3. **Targeted Student (s):** (Please Print)

a. Name: _____ Age: _____ Grade: _____ School: _____

b. Name: _____ Age: _____ Grade: _____ School: _____

4. **Alleged Aggressor (s):** (Please Print)

a. Name: _____ Age: _____ Grade: _____ School: _____

b. Name: _____ Age: _____ Grade: _____ School: _____

5. **Witnesses:**

a. Name: _____ c. Name: _____

b. Name: _____ d. Name: _____

6. **Type of Incident:**

a. ___ Student to Student b. ___ Staff to Student c. ___ Other

7. Date(s) of Incident:

a. Month ____ Day ____ Year ____ and Month ____ Day ____ Year ____

OR THE FOLLOWING INCLUSIVE DATES

b. Month ____ Day ____ Year ____ through Month ____ Day ____ Year ____

8. Please check the statement(s) that best describe what happened: (Choose all that apply)

- a. ____ Any bullying, cyberbullying, harassment, or intimidation that involves physical aggression.
- b. ____ Getting another person to hit or harm the student
- c. ____ Teasing, name calling, making critical remarks, or threatening, in person or by other means.
- d. ____ Demeaning and making the targeted student(s) the victim of jokes
- e. ____ Making rude and/or threatening gestures
- f. ____ Excluding or rejecting the student
- g. ____ Intimidating (Bullying), extorting or exploiting
- h. ____ Spreading harmful rumors or gossip
- i. ____ Electronic Communication (Please Specify) _____
- j. ____ Other (Please Specify) _____

9. Where did the incident happen: (Choose all that apply)

- a. ____ On School Property
- b. ____ On a School Bus
- c. ____ Technology(Social Media, cell phone, computer, etc)
- d. ____ On the way to/from school
- e. ____ At a school sponsored activity or event off school property
(Specify) _____

10. What did the alleged offender(s) say or do?(If necessary, attach separate sheet)

11. Is there a reason why the bullying, cyberbullying, harassment or intimidation occurred? (If necessary, attach separate sheet)

12. Did a physical injury result from the incident?

- a. ____ No
- b. ____ Yes, but it did not require medical attention
- c. ____ Yes, and required medical attention

13. Was the targeted student absent from school as a result of the incident?

- a. ____ Yes ____ Days absent
- b. ____ No

14. Is there additional information you would like to provide? (If necessary, attach separate sheet)

15. Reporter Signature: _____ **Date:** _____
16. Administrator Signature: _____ **Date:** _____
17. DAC Signature _____ **Date:** _____

East Greenbush Central School District

Bullying, Harassment, Cyberbullying, or Intimidation Response Form

East Greenbush Central School District has established a procedure for investigation and response to incidents of bullying, harassment, cyberbullying and intimidation that has occurred on school property at a school-sponsored activity or event off school property; on a school bus; or on the way to and/or from school in the current school year.

Documentation:

- | | |
|---|--|
| <input type="checkbox"/> Written Statement of targeted student | <input type="checkbox"/> Physical evidence (If applicable) |
| <input type="checkbox"/> Written statement of witness/bystander | <input type="checkbox"/> Medical Information (If applicable) |
| <input type="checkbox"/> Written statement of alleged aggressor | <input type="checkbox"/> Copy of police report (If applicable) |
| <input type="checkbox"/> Interview/notification of parents | <input type="checkbox"/> Copy of report form |
| <input type="checkbox"/> Interview of staff witness | <input type="checkbox"/> Copy of incident notification |

Action Taken and Date:

- | | |
|--|---|
| <input type="checkbox"/> Interview targeted student | <input type="checkbox"/> Reviewed physical evidence |
| <input type="checkbox"/> Interview alleged aggressor | <input type="checkbox"/> Reviewed medical evidence |
| <input type="checkbox"/> Interview witnesses | <input type="checkbox"/> Reviewed bus incident information |
| <input type="checkbox"/> Interview staff involved | <input type="checkbox"/> Reviewed student records |
| <input type="checkbox"/> Interview targeted student's parents | <input type="checkbox"/> Reviewed history between parties |
| <input type="checkbox"/> Interview alleged aggressor's parents | <input type="checkbox"/> Considered history of prior behavior |

Investigation Findings: (As determined by building principal and DASA Coordinator)

- The complaint is sustained. Bullying, Harassment, Cyberbullying or Intimidation was verified.
- The complaint was determined to be conflict.
- The complaint was not sustained. There was not enough verifiable proof that Bullying, Harassment, Cyberbullying or Intimidation was taking place or the complaining party has refused to assist in the investigation.
- Unfounded. The complaint was discovered to have no merit or the complaining party has informed the investigator that the allegations were false and untrue.

This section is designed to collect bullying incident information consistent with the New York State Department of Education's reporting categories of the Annual Incident Report. Please note, only check if your investigation provides evidence upon which to base this conclusion. If the reporting categories do not apply, please do not check.

Bullying, Harassment, Cyberbullying or Intimidation was founded on the basis of:

___ Gender ___ Sexual Orientation/Sex ___ Disability ___ Race/Color
 ___ Weight ___ Religion/Religious Practice ___ Ethnicity ___ Other (Please specify)

<u>Response/ Follow-Up Actions</u>	<u>Targeted Student</u>	<u>Alleged Aggressor</u>
Conference with Principal	_____	_____
Counseling Interventions	_____	_____
Referral to Dignity Coordinator	_____	_____

<u>Disciplinary Action</u>	<u>Targeted Student</u>	<u>Alleged Aggressor</u>	<u>Responsible Party</u>
Consultation w/school staff	_____	_____	_____
Student Contract	_____	_____	_____
Review of Code of Conduct	_____	_____	_____
Loss of Privileges	_____	_____	_____
Restorative Justice	_____	_____	_____
Loss of bus/school privileges	_____	_____	_____
Detention	_____	_____	_____
Suspension	_____	_____	_____

<u>Proactive/Teaching Actions</u>	<u>Targeted Student</u>	<u>Alleged Aggressor</u>	<u>Responsible Party</u>
Restorative Justice	_____	_____	_____
No action warranted	_____	_____	_____
Counseling Interventions	_____	_____	_____
Referral to Community Service	_____	_____	_____

Targeted student parent notification on completion of notification: Date of notification _____

Notified by: _____ Means of notification: ___ Phone ___ Letter ___ Conference

Alleged aggressor student parent notification on completion of notification: Date of notification _____

Notified by: _____ Means of notification: ___ Phone ___ Letter ___ Conference

Administrator Signature: _____ **Date** _____