

Gadsden County School District
BULLYING AND HARASSMENT FINAL REPORT FORM

School Personnel Completing Form: _____ Position: _____

Today's date: _____ / _____ / _____ School: _____
Month Day Year

Name of Person Who Reported the Incident (From Reporting Form): _____	
Date of Initial Report: _____	Telephone: _____ E-mail: _____
<input type="checkbox"/> Student	<input type="checkbox"/> Parent/guardian <input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> Written Report (form)	<input type="checkbox"/> Verbal Report <input type="checkbox"/> Online Report <input type="checkbox"/> Anonymous Report

1. Name of alleged victim: _____ Male/ Female: _____ Grade: _____ Age: _____
(Please print) Race: _____ Disabled Yes No
Days absent as a result of the incident: _____

2. Name(s) of alleged offender(s) (If known):	Age	School	Is he/she a student?	Days absent due to incident (Include OSS)
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

(Please print)

INVESTIGATION

3. Parents/legal guardians of all involved were notified after the investigation was initiated. Date _____ Method _____

4. What actions were taken to investigate this incident? (choose all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Interviewed alleged victim Date _____ | <input type="checkbox"/> Interviewed alleged victim's parent/guardian Date _____ |
| <input type="checkbox"/> Interviewed alleged offender(s) Date _____ | <input type="checkbox"/> Interviewed alleged offender's parent/guardian Date _____ |
| <input type="checkbox"/> Interviewed witnesses Date _____ | <input type="checkbox"/> Examined physical evidence |
| <input type="checkbox"/> Witness statements collected in writing | <input type="checkbox"/> Conducted student record review (for past incidents, etc.) |
| <input type="checkbox"/> Reviewed any medical information available | <input type="checkbox"/> Obtained copy of police report |
| <input type="checkbox"/> Interviewed teachers/relevant school staff Date _____ | <input type="checkbox"/> Other (specify) _____ |

5. Nature of Incident: Possible reasons/alleged motives for the bullying incident (choose all that apply – be specific)

- | | |
|--|---|
| <input type="checkbox"/> Because of race | <input type="checkbox"/> Because of physical appearance |
| <input type="checkbox"/> Because of national origin | <input type="checkbox"/> To impress others |
| <input type="checkbox"/> Because of marital status | <input type="checkbox"/> Just to be mean |
| <input type="checkbox"/> Because of gender | <input type="checkbox"/> Past conflicts |
| <input type="checkbox"/> Because of gender identity | <input type="checkbox"/> Retaliation |
| <input type="checkbox"/> Because of religion | <input type="checkbox"/> Because of another reason (specify): _____ |
| <input type="checkbox"/> Because of disability | <input type="checkbox"/> The reason is unknown |
| <input type="checkbox"/> Because of imbalance of power | |

6. Brief summary of incident: _____

7. Where has the alleged bullying/harassment occurred? _____

8. Was a clear threat involved? Yes No What was said _____

9. Frequency and History: Did the alleged bullying occur at regular times/occasions/places? How often? Have any incidents occurred in the past by the same person/people? Any past incidents from a different person/people?

10. Effects of the bullying or harassment incident:

- Disrupted school environment and the educational process
- Physical Harm. Any possible permanent effects? Yes No
- Emotional/psychological harm or discomfort
- Absenteeism
- Damage to reputation and/or relationships
- Other (specify) _____

11. What corrective actions were taken in this case?

Unsubstantiated	Substantiated – Level III
<input type="checkbox"/> Parent contact	<input type="checkbox"/> Parent contact
<input type="checkbox"/> Student conference	<input type="checkbox"/> Behavior/No Contact contract
<input type="checkbox"/> Student warning	<input type="checkbox"/> Suspension from bus – How many days_____
<input type="checkbox"/> Withdrawal of privileges	<input type="checkbox"/> In-school suspension – How many days_____
<input type="checkbox"/> Detention – How many days_____	<input type="checkbox"/> Out-of-school suspension - How many days_____
<input type="checkbox"/> In-school suspension – How many days_____	<input type="checkbox"/> Referral to law enforcement
<input type="checkbox"/> Counseling: Details _____	<input type="checkbox"/> Counseling: Details _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other (specify) _____

12. What actions were taken in this case to protect the victim (**choose all that apply in both cases of substantiated and unsubstantiated incidents**)?

- Safety plan in place
- Monitoring situation
- Schedule change
- Transportation supervision
- Recommended staff the victim can go to if they feel unsafe
- No contact directive
- Additional bullying prevention education delivered
- Following-up meeting in place
- Counseling: Details _____
- Other: _____

13. Parents/legal guardians of all involved were notified that the investigation is complete. Date_____ Method_____

14. Parents informed of the investigation outcome and the actions taken to protect the victim. Date_____

Informed : By Phone In Parent Conference By Letter

15. Additional pertinent information gained during investigation _____

(Attach a separate sheet if necessary)

16. Physical evidence collected: _____

(Attach a separate sheet if necessary)

This allegation is: **Substantiated** **Unsubstantiated**

17. Entered into district discipline system: Yes No

Substantiated
Unsubstantiated

BUL – Bullying or HAR – Harassment
UBL – Unsubstantiated Bullying or UHR – Unsubstantiated Harassment

If unsubstantiated as bullying and/or harassment, what was the infraction? (Examples: Disrespect, Misconduct, Altercation, Intimidation/Threats, Verbal Confrontation, Unauthorized Use of Technology, Other)_____

Investigator Signature: _____ **Date:** _____

****Attach copies of supporting documentation (Bullying/Harassment Report Form, Witness Statement Form, all interview notes, and any physical evidence for your records. Send a copy of this form to Student Services)****