

PALISADES SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: October 2014

No. AR 249.1 – Palisades School District Incident Form

PALISADES SCHOOL DISTRICT BULLYING AND HARASSMENT INVESTIGATION FORM

School Personnel Completing Form: _____

Position: _____ School/ Location: _____

Today's date: _____

Person Reporting Incident Name: _____

(From reporting form)

Telephone: _____ E-mail: _____

Place an **X** in the appropriate box:
☐ Student
 ☐ Student (Witness/Bystander)
 ☐ Parent/guardian
 ☐ Close adult relative
 ☐ School Staff

1. Victims

Name(s)	Age	Male (M)/ Female (F)	Ethnicity	School	Is he/she a student (Y/N)?	Days absent due to the incident

Ethic Code Key

A- Asian
AI/AN- American Indian or Alaskan Native
B- Black, not of Hispanic Origin
F- Filipino
H- Hispanic
PI- Pacific Islander
W- White

2. Offenders

Name(s) of alleged offender(s) (If known):	Age	Male (M)/ Female (F)	Ethnicity	School	Is he/she a student (Y/N)?	Days absent due to the incident

INVESTIGATION

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

- | | |
|--|---|
| <input type="checkbox"/> Interviewed student victim | <input type="checkbox"/> Interviewed school nurse |
| <input type="checkbox"/> Interviewed alleged offender(s) | <input type="checkbox"/> Reviewed any medical information available |
| <input type="checkbox"/> Interviewed witnesses | <input type="checkbox"/> Interviewed teachers and/or school staff |
| <input type="checkbox"/> Witness statements collected in writing | <input type="checkbox"/> Interviewed student victim's parent/guardian |

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- ☐ Interviewed alleged offender's parent/guardian
- ☐ Examined physical evidence
- ☐ Conducted student record review

- ☐ Obtained copy of police report
- ☐ Parents/victims notified of their rights/responsibilities
- ☐ Other (specify) _____

4. Additional pertinent information gained during the interview: _____

(Attach a separate sheet if necessary)

5. What is the nature of the harassment, intimidation or bullying (alleged motives)? (choose all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Race | <input type="checkbox"/> Gender identity | <input type="checkbox"/> To impress others |
| <input type="checkbox"/> National origin | <input type="checkbox"/> Religion | <input type="checkbox"/> Just to be mean |
| <input type="checkbox"/> Marital status | <input type="checkbox"/> Disability | <input type="checkbox"/> Another reason (specify) _____ |
| <input type="checkbox"/> Sex | <input type="checkbox"/> Physical appearance | <input type="checkbox"/> The reason is unknown |
| <input type="checkbox"/> Sexual orientation | | |

6. What corrective actions were taken in this case (choose all that apply)?

- | | |
|---|---|
| <input type="checkbox"/> None were required, this was a false allegation | <input type="checkbox"/> Exclusion from school-sponsored events |
| <input type="checkbox"/> None, the incident did not warrant any corrective action | <input type="checkbox"/> Restorative Circle |
| <input type="checkbox"/> Student conference | <input type="checkbox"/> Saturday detention |
| <input type="checkbox"/> Student verbal warning | <input type="checkbox"/> Administrative detention |
| <input type="checkbox"/> Letter of apology | <input type="checkbox"/> Parent phone call |
| <input type="checkbox"/> Mediation | <input type="checkbox"/> Parent conference |
| <input type="checkbox"/> Counseling within the school | <input type="checkbox"/> Referral to law enforcement |
| <input type="checkbox"/> Counseling/Therapy outside of school | <input type="checkbox"/> In-school suspension |
| <input type="checkbox"/> Parent letter | <input type="checkbox"/> Out-of-school suspension |
| <input type="checkbox"/> Loss of school privileges | <input type="checkbox"/> Expulsion |
| <input type="checkbox"/> Transfer to another school building, classroom or school bus | <input type="checkbox"/> Risk assessment |
| | <input type="checkbox"/> Other (specify) _____ |

7. Was this incident designated as bullying, harassment or intimidation?

☐ Founded

☐ Unfounded

Signature: _____

Date: _____

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Additional notes:
