## WILLIAM FLOYD UNION FREE SCHOOL DISTRICT

## Incident of Bullying, Discrimination & Harassment Reporting Form Please complete the entire form to the best of your ability

School Personnel Completing Form: Position: Date:						
Name of Person Reporting Incident:						
Please check one:StudentStudent(with	ess/bysta	nder)P	arent/GuardianClose a	dult Schoo	l StaffOther	
1. Name of student targeted:		Age:	# of days abs	sent due to inc	ident:	
2. Name(s) of alleged offenders if known	Age	M/F	School (if know	wn)	Is he/she a student	
					Yes or No	
					Yes or No	
					Yes or No	
					Yes or No	
Total number of alleged offenders:		1			I	
Total number of student victims(z):						
Total number of staff victims(aa):						
Total number of other victims(bb):						
INVESTIGATION:						
3. Where did the alleged incident happen (choose	all that a	pply):				
On School Property(t)			At a school sponsored	l activity or ev	ent off school property(u)	
On a School Bus(t)						
During regular school hours(x)Off school property(v)						
Before/after regular school hours(y)						
Date of incident:						
4. Place an "X" next to the statement(s) that best  Any bullying, harassment, or intimidation that involves physical aggression  Getting another person to hit or harm the stu  Teasing, name-calling, making critical remarks or threatening, in person or by other means Incident involving verbal threat but no physical Incident involving only student offenders Incident involving both student and employed Electronic Communication. (sexting/cyberb)  Other (specify):  Other (specify):  Because of race (c)  Because of national origin (e)  Because of religion (g)	dent rks, ical contact ee offende ullying, e ion occur	ct ers ttc.) (speci	Spreading harmful run Intimidating (bullying Excluding or rejecting Making rude and/or th Demeaning and makin Incident involving phy Incident involving only	mors or gossip g), extorting, or g the student reatening gest ing the victim o ysical contact b y employee of  t apply): Bo To	r exploiting tures of jokes oy no verbal threat	
Because of disability (i)					st to be mean	
Because of sexual orientation (k)		Because of sex (l)				
Other reason (n) (specify)						
6. Additional pertinent information gained during	g the inte	rview (at	tached a separate sheet	of paper if ne	cessary):	
7. Investigator notes (attached a separate sheet of	paper if	necessary	y):			
9 Payant Contacted, Date	Fina o		E-II P			
8 . Parent Contacted: Date:	ı ıme:		r onow-up Da	ne:		

9. DASA/Conflict/Other (please circle one)