

GANG-RELATED INCIDENT REPORTING FORM

Directions: This is a form to report alleged gang activity and similar destructive or illegal group behavior or to report reprisal or retaliation against individuals who report gang activity and similar destructive or illegal group behavior or who are victims, witnesses, bystanders, or others with reliable information about an act of gang activity and similar destructive or illegal group behavior which occurred on school property, on school buses, or at school-sponsored events.

Gang: "Criminal Gang" means a group or association of three or more persons whose members:

- (1) individually or collectively engage in a pattern of criminal gang activity;
- (2) have as one of their primary objectives or activities the commission of one or more underlying crimes, including acts by juveniles that would be underlying crimes if committed adults; and
- (3) have in common an overt or covert organizational or command structure.

Gang Activity: "Pattern of criminal gang activity" means the commission of, attempted commission of, conspiracy to commit, or solicitation of two or more underlying crimes or acts by a juvenile that would be an underlying crime if committed by an adult.

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

School: _____

School System: _____

PERSON REPORTING INCIDENT Name: _____

Telephone: _____ E-mail: _____

Place an X in the appropriate box: Student Student (Witness/Bystander) School Staff

Other _____

1. Name of student victim: _____ Age: _____
(Please print)

2. Name(s) of alleged offender(s) (If known): <small>(Please print)</small>	Age	School
Is he/she a student? <small>(if known)</small>		
_____	_____	_____
<input type="checkbox"/> Yes <input type="checkbox"/> No		
_____	_____	_____
<input type="checkbox"/> Yes <input type="checkbox"/> No		
_____	_____	_____
<input type="checkbox"/> Yes <input type="checkbox"/> No		

3. On what date(s) did the incident happen?

_____ / _____ / _____ _____ / _____ / _____ _____ / _____ / _____
Month Day Year Month Day Year Month Day Year

4. Please describe what occurred:

5. Where did the incident occur (choose all that apply)?

- On school property At a school-sponsored activity or event off school property
 On a school bus On the way to/from school*

*Will be collected unless specifically excluded by local board policy

6. What did the alleged offender(s) say or do?

(Attach a separate sheet if necessary)

7. Why did the activity occur? _____

(Attach a separate sheet if necessary)

8. Did a physical injury result from this incident? Place an X next to one of the following:

- No Yes, but it did not require medical attention Yes, and it required medical attention

9. If there was a physical injury, do you think there will be permanent effects? Yes No

10. Was the student victim absent from school as a result of the incident? Yes No
If yes, how many days was the student victim absent from school as a result of the incident? _____

11. Did a psychological injury result from this incident? Place an X next to one of the following:

- No Yes, but psychological services have not been sought Yes, and psychological services have been sought

12. Is there any additional information you would like to provide?

(Attach a separate sheet if necessary)

Signature: _____

Date: _____