





Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_

If bullying verified, has invitation to meeting been sent to parents or students?

Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_  
Parent's Names: \_\_\_\_\_ Date Notified: \_\_\_\_\_

Date(s) of meetings: \_\_\_\_\_  
\_\_\_\_\_

If bullying verified, has school developed student safety support-intervention plan?  Yes  No

[attach bullying complaint, witness statements, invitations to parent meetings, records of parent meetings and notification to parents of students involved if bullying is verified]

**Policy and Administrative Regulation Approved by the Killingly BOE Effective November 2, 2011**