

Dignity for All Students Act (DASA) Responding to Incidents

Bullying, Harassment and Discrimination -- For District/School files only

PART 1. DASA COMPLAINT FORM

A DASA complaint form must be posted on the District website and communicated to parents and students on an annual basis. To be completed by person reporting the incident (or the person receiving the complaint and/or investigating the incident) and submitted to the Dignity Act Coordinator (DAC).

School District:

School:

Dignity Act Coordinator:

Today's Date:

Name and position of person reporting the incident:

Role of person reporting Incident (*Check one*):

Anonymous report

Student Target

Student (witness)

Parent/Guardian

Staff Member

Other

Phone:

E-mail

Name of Target: (student being bullied, harassed, or discriminated against)

Name(s) of alleged offender(s):

Date and time of incident:

What was your involvement in the incident?:

I observed the incident

I was directly involved in the incident

I heard about the incident

Where did the incident happen? (*Check all that apply*)

On School Property

Cafeteria

Hallway

Off School Property

Classroom

Gym

School Bus

At school

Bathroom

Locker Room

function

Other (describe):

Electronic Communication:

Type of Incident (*check all that apply*)

Physical contact (kicking, punching, spitting, tripping, pushing, taking belongings)

Verbal threats (gossip, name-calling, put-downs, teasing, being mean, taunting, making threats)

Psychological (non-verbal actions, spreading rumors, social exclusion, intimidation)

Abuse (actions or statements that put an individual in fear of bodily harm)

Cyberbullying (misusing technology/social media to harass, tease, threaten, post pictures (sexting))

Other (describe)

Who was involved in the incident? *(Check all that apply)*

Student

Employee

Other:

Describe the specific nature of the incident. What happened? *(Be as specific as possible). What did the alleged offender say or do? Include any copies of text messages, emails, etc. If possible. (Add extra pages if needed)*

If there were any adults in the area when this happened, what did they do?

Types of bias involved (if known): *(Check all that apply)*

Race

Color

Weight/Size

Religion

Religious Practice

Disability

National Origin

Ethnic Group

Gender

Sexual Orientation

Sex

Other (describe) :

Name(s) of others who may have witnessed the incident:

Was the student absent from school as a result of the incident?

No

Yes, Number of days student was absent:

Describe the situation continue to occur?

Yes

No

What do you think should be done about the situation?

You can contact the school administrator, Dignity Act Coordinator, counselor, or other staff member (whoever you are most comfortable with) for information or assistance at any time.