

## 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): (Please print)  
 Is he/she a student? (if known)

Age School

\_\_\_\_\_  Yes  No

\_\_\_\_\_

\_\_\_\_\_  Yes  No

\_\_\_\_\_

\_\_\_\_\_  Yes  No

\_\_\_\_\_

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

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

4. Please describe what occurred:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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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?

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(Attach a separate sheet if necessary)

7. Why did the activity occur? \_\_\_\_\_

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(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?

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(Attach a separate sheet if necessary)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_