

**INCIDENT REPORTING FORM
DIGNITY FOR ALL STUDENTS ACT**

It is the Policy of the Ballston Spa Central School District to provide a school environment that is free from harassment, bullying and discrimination for all students. Harassment or discrimination of a student by another student or by school employees on school property or at a school function on the basis of actual or perceived race, color, weight, national origin, ethnic group, religion, religious practice, disability, sexual orientation, gender or sex is expressly prohibited. If you believe you, or someone else, has been the target of harassment, bullying, cyber-bullying and/or discrimination, please use this form to report all allegations.

I. To be completed by the person reporting the incident (or the person receiving the complaint and/or investigating the incident)

School District: _____ School: _____

Dignity Act Coordinator: _____

Name of Person Reporting Incident: _____ Today's Date: _____

Role of person reporting incident (check one):

- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> Student (target) | <input type="checkbox"/> Staff Member | <input type="checkbox"/> Administrator |
| <input type="checkbox"/> Student (witness) | <input type="checkbox"/> Parent | <input type="checkbox"/> Other _____ |

Contact information for person reporting the incident:

Phone Number: _____ Email: _____

II. INCIDENT INFORMATION

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

Name(s) of Alleged Offender(s):

Date(s) and Time(s) of Incident(s):

What was your involvement in the incident?

- I was directly involved
- I saw/observed the incident
- I heard about the incident

Where did the incident occur? Check all that apply- identify specific location if possible)

- | | |
|---|---|
| <input type="checkbox"/> On school property | <input type="checkbox"/> Locker Room |
| <input type="checkbox"/> Classroom | <input type="checkbox"/> At a school function |
| <input type="checkbox"/> Hallway | <input type="checkbox"/> On a school bus |
| <input type="checkbox"/> Bathroom | <input type="checkbox"/> Off school property |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Electronic communication |
| <input type="checkbox"/> Gym | <input type="checkbox"/> Other (describe): _____ |

Type of Incident (check all that apply)

- Physical Contact (kicking, punching, spitting, tripping, pushing, taking belongings, hitting, etc.)
- Verbal threats (gossip, name-calling, put-downs, teasing, taunting, threatening, etc.)
- Psychological (non-verbal actions, spreading rumors, social exclusion, intimidation, etc.)
- 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, etc.)
- Other (describe): _____

Who was involved in the incident?

- | | |
|--|--|
| <input type="checkbox"/> Student | <input type="checkbox"/> Visitor/Guest to School |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Both student and employee | |

Ballston Spa

CENTRAL SCHOOL DISTRICT

Educating Everyone Takes Everyone

Witnesses? (Who was around or nearby who may be able to provide additional information – adults, students, etc.?)

Identify what characteristics [actual or perceived] of the target that were the subject of the discriminatory or harassing behavior: (check all that apply):

- | | | |
|---|---|---|
| <input type="checkbox"/> Color | <input type="checkbox"/> National Origin | <input type="checkbox"/> Sexual Orientation |
| <input type="checkbox"/> Disability | <input type="checkbox"/> Race | <input type="checkbox"/> Weight/Size |
| <input type="checkbox"/> Ethnic Group | <input type="checkbox"/> Religion | <input type="checkbox"/> Other (please list): |
| <input type="checkbox"/> Gender | <input type="checkbox"/> Religious Practice | _____ |
| <input type="checkbox"/> Gender Identity/Expression | <input type="checkbox"/> Sex | |

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

- No
- Yes - Number of days absent: _____

Does this situation continue to occur? Yes No Unsure

Any known prior documented incidents by alleged aggressor? Yes No Unsure

If yes, have incidents involved the Target identified above? Yes No Unsure

What do you think should be done about the situation?

*Retaliation or threats of retaliation against any person involved in an investigation of harassment or discrimination (including those who initiate the complaint, participate or conduct the investigation or are involved or testify related to the complaint) is a violation of the law. If you believe that you have been subjected to retaliation on the basis of your cooperation with the investigation, please notify **Daina Sisk, Dignity Act Coordinator** at (518) 884-7150, Ext. 2355.*