**File: JICDE*-E-2**

## Bullying Investigation Form

*Instructions: Attach all reports, documents, evidence, and written accounts of the alleged bullying incident(s) to this investigation form.*

Date of Bullying Report: _____

Designated Administrator: _____

Date Designated Administrator Received Report: _____

Date Investigation Started: _____ Date Investigation Completed:

Investigator: _____ Position/Title: _____

### I. Initial Review

Is the alleged bullying incident(s) within the District's authority to investigate?
[ ] Yes [ ] No *If No, notify the Complainant and provide resources for support. If Yes, move to next question.*

Is the alleged bullying incident(s) within the scope of this exhibit's accompanying policy?

*If No, the report should be promptly investigated pursuant to the applicable Board policy.*
*If Yes, promptly investigate the complaint pursuant to this exhibit's accompanying policy.*

If possible criminal conduct is involved, was law enforcement notified?
[ ] Yes [ ] No [ ] N/A

Date: _____ Contact person: _____

Status, if known: _____
_____

### II. Bullying Report & Investigation Information

Name of Complainant: _____
Check one: [ ] Student [ ] Parent/Guardian [ ] Staff
[ ] Other (please specify): _____

If a student, specify school and grade (optional): _____
If a parent/guardian or other, provide contact information: _____

Is the Complainant the target of the alleged bullying being reported? [ ] Yes [ ] No

Does the Complainant wish to remain anonymous? [ ] Yes [ ] No

Student(s) reported as targets of alleged bullying (use reverse side if needed):

Name: _____ School: _____ Grade: ____
Name: _____ School: _____ Grade: ____
Name: _____ School: _____ Grade: ____

Person(s) reported as engaged in alleged bullying conduct (use reverse side if needed):

Name: _____ [ ] Student [ ] Staff [ ] Other
Name: _____ [ ] Student [ ] Staff [ ] Other
Name: _____ [ ] Student [ ] Staff [ ] Other

Person(s) reported as having witnessed or knowledge about the alleged bullying (use reverse side if needed):

Name: _____ [ ] Student [ ] Staff [ ] Other
Name: _____ [ ] Student [ ] Staff [ ] Other
Name: _____ [ ] Student [ ] Staff [ ] Other

Description of the alleged bullying incident(s), including date(s), times(s), locations(s), methods (e.g., physical, verbal, written, electronic/social media, psychological, social, images or items displayed or worn, etc.), how often the incident(s) occurred, whether an imbalance of power exists between the target and the perpetrator/the relationships of the involved individuals, and whether the alleged bullying was based on any protected category under federal or state law or school board policy (use reverse side and/or additional pages if
needed): _____
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Did the Complainant allege that the student(s) were the targets of the alleged bullying in any of the following way(s)? (Check all that apply.)

[ ] Electronic devices (e.g., internet, Social media platforms, text, email, cyber-bullying, etc.)
[ ] Written communication (e.g., email, handwritten notes, other written documents, etc.)
[ ] Physical act or conduct (e.g., pushing, hitting, destruction of property, stalking, etc.)
[ ] Verbal act or conduct (e.g., rumors, lies, name-calling, using derogatory slurs, etc.)
[ ] Social (e.g., purposeful exclusion, causing psychological harm, etc.)
[ ] Items depicting implied hatred or prejudice worn, possessed, or displayed
[ ] Other (please explain): _____

Did the Complainant allege that the alleged bullying incident(s) was based on any of the following characteristics? (Check all that apply; if yes, refer to the appropriate policy and procedure addressing nondiscrimination/equal opportunity or sexual harassment under Title IX.)

[ ] Race [ ] Color [ ] National Origin
[ ] Religion [ ] Sex [ ] Ancestry
[ ] Age [ ] Military Status [ ] Sexual orientation
[ ] Physical disability [ ] Mental disability [ ] Gender expression
[ ] Gender identity [ ] Creed
[ ] Family Composition
[ ] Association with a person or group with one or more of the above actual or perceived characteristics

[ ] Other (please specify): _____

Evidence of alleged bullying provided to the school or in the school's possession (e.g., school or bus surveillance video, cell phone video, photographs, digital images, emails, letters, written statements, notes, police reports, etc.) (attach all evidence):

_____
_____
_____
_____
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_____

Have there been any prior incidents of bullying (alleged or substantiated) involving any or all of the involved individuals? _____

_____
_____
_____
_____
_____

Additional school staff, if any, involved in investigation:

Name: _____ Position: _____
Role in Investigation: _____

Name: _____ Position: _____
Role in Investigation: _____

Name: _____ Position: _____
Role in Investigation: _____

## III. Special Education Review

Do any of the students involved in the alleged bullying incident(s) receive special education services under an IEP or a Section 504 Plan, or are any of the students in the process of being referred or evaluated for special education services? ***If Yes, refer to student's IEP or 504 Plan and contact special education director or Section 504 coordinator.***
[ ] Yes [ ] No

Name: _____ Date of Contact: _____
[ ] IEP [ ] 504 Plan [ ] Referral or Evaluation

Name: _____ Date of Contact: _____
[ ] IEP [ ] 504 Plan [ ] Referral or Evaluation

Name: _____ Date of Contact: _____
[ ] IEP [ ] 504 Plan [ ] Referral or Evaluation

## IV. Interim Measures

Were any interim measures implemented for any of the involved students?
[ ] Yes [ ] No

Student Name: _____ School: _____ Grade: _____
Description of interim measure (e.g., safety plan, duration, etc.) (attach documentation):
_____
_____

Student Name: _____ School: _____ Grade: _____
Description of interim measure (e.g., safety plan, duration, etc.) (attach documentation):
_____
_____

Student Name: _____ School: _____ Grade: _____
Description of interim measure (e.g., safety plan, duration, etc.) (attach documentation):
_____
_____

## V. Findings

Summary of findings of the investigation (i.e., determine whether the alleged conduct did or did not constitute bullying or other prohibited behavior under this exhibit's accompanying policy; determine whether the alleged conduct adversely affected any of the involved students' education or educational environment; and why) (attach additional pages if needed):

## IV. Parent/Guardian Notification

Document notification(s) to the students involved in the alleged incident(s) of bullying and their parents/guardians of the outcome of the investigation and any other information deemed appropriate by the investigator and designated administrator. The information may be provided, based on school district policy, procedures, and practice, as well as taking into consideration the circumstances of the matter, in the form of a written report or meetings with each student and the student's parents/guardians, and may

include an overview of the investigation process, the findings of the investigation, and the actions taken to address the reported incident of bullying. ***Information shared with students and parents/guardians must be in accordance with applicable law and school Board policy.***

Student Name: _____ School: _____ Grade: ____
Parent/Guardian Contacted: _____
Staff Member (name and position/title): _____
Date(s) of Contact: _____
Type of Contact (phone, in person, email): _____
Summary of information provided, discussion, and next steps: _____
_____
_____
_____

Student Name: _____ School: _____ Grade: ____
Parent/Guardian Contacted: _____
Staff Member (name and position/title): _____
Date(s) of Contact: _____
Type of Contact (phone, in person, email): _____
Summary of information provided, discussion, and next steps: _____
_____
_____

Student Name: _____ School: _____ Grade: ____
Parent/Guardian Contacted: _____
Staff Member (name and position/title): _____
Date(s) of Contact: _____
Type of Contact (phone, in person, email): _____
Summary of information provided, discussion, and next steps: _____
_____
_____

## VI. Interventions

Interventions to address bullying may include, but are not limited to, school social work services, restorative measures, social-emotional skill building, counseling, school psychological services, development of a safety plan, community-based services, and discipline. ***The school district should refer to its code of conduct and discipline policies and procedures for next steps regarding any disciplinary actions that may result from a bullying incident.***

Student Name: _____ School: _____ Grade: ___
Intervention: _____
_____
Outcome: _____
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Student Name: _____ School: _____ Grade: ___
Intervention: _____
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Outcome: _____
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Student Name: _____ School: _____ Grade: ___
Intervention: _____
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Outcome: _____
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## VI. Recordkeeping

The bullying report, investigation checklist/documentation and evidence, written findings reports (if any), records of any responsive actions in accordance with applicable law, and any other records related to investigating the reported incident(s) of bullying and any responsive actions will be maintained in accordance with applicable law and school Board policy.

Checklist and documentation submitted to): _____
Date: _____

Investigator Signature: _____ Date: _____

Issue Date: June 21, 2022
Revised: October 15, 2025
Revised: October 21, 2025