

**SEXUAL HARASSMENT INCIDENT REPORT FORM**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Room/Location: \_\_\_\_\_

Student(s) Initiating Alleged Sexual Harassment:

\_\_\_\_\_ Grade: \_\_\_\_\_ Class: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_ Class: \_\_\_\_\_

Student(s) Affected:

\_\_\_\_\_ Grade: \_\_\_\_\_ Class: \_\_\_\_\_

\_\_\_\_\_ Grade: \_\_\_\_\_ Class: \_\_\_\_\_

Check all spaces below that apply. Adult stated or identified inappropriate behaviors as:

Name Calling

Stalking

Inappropriate Gesturing

Staring/Leering

Writing/Graffiti

Threatening

Taunting/Ridiculing

Inappropriate Touching

Other \_\_\_\_\_

Spitting

Demeaning Comments

Stealing

Damaging Property

Shoving/Pushing

Hitting/Kicking

Flashing a Weapon

Intimidation/Extortion

Describe the incident:

\_\_\_\_\_  
\_\_\_\_\_

Witnesses Present: \_\_\_\_\_

Physical evidence: Graffiti \_\_\_\_\_ Notes \_\_\_\_\_ E-mail \_\_\_\_\_ Web sites \_\_\_\_\_ Video/audio tape \_\_\_\_\_

Other \_\_\_\_\_

Staff signature \_\_\_\_\_

Parent(s) contacted: Date \_\_\_\_\_ Time \_\_\_\_\_

Administrative response taken:

\_\_\_\_\_