

SACKETS HARBOR CENTRAL SCHOOL DISTRICT
215 South Broad Street, PO Box 290, Sackets Harbor, NY 13685

Dignity for All Students (Bullying, Harassment, and Hazing)
Bullying Reporting Form

The Dignity for All Students Act amends Education Law to put in place procedures for the creation of school environments free of discrimination and harassment. The law is effective July 1, 2012. "The legislature finds that students' ability to learn and to meet high academic standards and the school's ability to educate its students, are compromised by incidents of discrimination or harassment including bullying, taunting, or intimidation."

Directions: Harassment, hazing, or bullying are serious and *will not be tolerated*. Please use this form to report alleged harassment, hazing or bullying that occurred on school property, at a school sponsored activity or event, on or off school property, on a school bus, or on the way to and/or from school. Any person (student, parent/caregiver, community member, faculty/staff member, etc.) observing, or being the target of bullying, hazing, harassment or perceived bullying, hazing, harassment activity **reports the observation. Please complete and return this form to Ms. Gaffnev or Mr. Tastor.** Contact the school for additional information or assistance.

PERSON REPORTING INCIDENT* (PLEASE PRINT)

Name: _____ **E-mail address:** _____

Relationship to Target: _____ **Did you witness the incident?** _____

1. Name of alleged target : _____
Grade/Age: _____

2. Name(s) of alleged offender(s) (if known):	Grade	School
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Name(s) of possible witness(es):	Grade
_____	_____
_____	_____

4. Where did the incident happen? Choose all that apply:

- Classroom Playground / Recess Field Trip Cafeteria School Bus Library Hallway On the way to / from school Locker Room Electronically/Cyberspace
 Other: _____

5. Place an (X) next to the statement(s) that best describe what happened. Choose all that apply:

- Hitting, kicking, shoving, spitting, hair pulling, or throwing something
 Getting another person to hit or harm the student
 Teasing, name-calling, making critical remarks, or threatening, in person or by other means
 Demeaning remarks or student being made the target of joke(s)
 Making rude or threatening gestures
 Excluding or rejecting the student, or asking another person to turn against a student
 Intimidating (bullying), extorting, or exploiting
 Spreading harmful rumors or gossip

6. What did the alleged offender(s) say or do? Explain in the space provided below.

7. Is this the first time? Yes No

If not, what happened? _____

9. Is there any additional information you would like to provide? Explain in the space provided below.

Signature*: _____ Date: _____

*This report may be completed anonymously, but doing so may limit the follow up that can occur.

Please complete and return this form to Ms. Gaffney or Mr. Tastor.

Name of person investigating the referral: _____

Date: _____

Actions Taken: (attach any additional notes related to this investigation) _____

For office use:

Check all that apply:

___ not bullying behavior (rude, unintentional, poor manners)

___ determined to be mutual conflict

___ Bullying behaviors were noted. Student was provided education on bullying and given a warning that any future incidents of this behavior would result in a consequence.

___ Bullying behavior was noted. Similar concerns were previously addressed. The student was given

the following consequence _____

___ Plan developed to ensure that all students in the referral feel comfortable in school
(plan attached)

Number of victims of bullying behavior _____

___ Please check if this is determined to be a Material Incident of Discrimination/Harassment