Directions: The Bainbridge-Guilford Central School District is committed to providing a safe environment to all members of our community. Despite our best intentions, incidents between students, students and staff do occur at times. If you wish to report a disturbing incident between two or more students, or between a student and staff member, complete this form and return it to the Principal at the Student's school. Contact the school for additional information or assistance at any time. This form can be completed anonymously by omitting signature and name. Every reported act of bullying will be investigated. Parents of aggressors and targets will be contacted in cases of confirmed bullying.

Dignity for All Students Act (DASA) Incident Reporting Form

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

Today's date:		Name of School:			
Name of person rep	orting incident:				
Role of person repo	orting incident (Check	(one)			
□Student target	□Student (witness)	□Parent/Guardian	□Staff member	□Other	
Phone:		Email:			
Name of target: (stu	ident being bullied, h	arassed, or discrimi	nated against)		
Name(s) of alleged	Offender(s):				
Date(s) and time(s)	of incident(s):				
What was your invo	lvement in the incide	ent?			
\Box I was directly involved in the incident \Box I observed the incident \Box I heard about the incid				l about the incident	
Where did the incide	ent happen? (Check	all that apply)			
□On school propert	ty □Cafeteria	□Cafeteria		□On a school bus	
□Classroom	□Gym	□Gym		□Off school property	
□Hallway	□Locker room	□Locker room		Electronic communication	
□Bathroom	□At a school	□At a school function		□Other <i>(describe)</i> :	

Type of incident (Check all that apply)

□Physical contact (kicking, punching, spitting, tripping, pushing, taking belongings)

□Verbal threats (gossip, name-calling, put-downs, teasing, being mean, taunting, making threats)

□Psychological (non-verbal actions, spreading rumors, social exclusion, intimidation)

□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) □Other *(describe)*:

Who was involved in the incident?

□Student □Employee □Both student and employee

Describe the specific nature of the incident. What happened? (Be as specific as possible). What did the alleged offender say or do? Include any copies of text messages, emails, etc. if possible.

(add extra pages if needed)

If there were any adults in the area when this happened, what did they do?

Types of bias involved (if known): (Check all that apply)

□Religion

□Race

□Sex

□Color □Religious practice □Other (describe)

□Weight/size □Disability

□National origin □Sexual orientation

□Ethnic group □Gender

Names of others who may have witnessed the incident:

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

□ No □ Yes Number of days student was absent: _____

Does the situation continue to occur? \Box Yes \Box No

What do you think should be done about the situation?

Please return the completed from to Dignity Act Coordinator or Building Administrator.

You can contact the school administrator, Dignity Act Coordinator, counselor, or other staff member (whoever you are most comfortable with) for information or assistance at any time.