

Bullying, Harassment, or Intimidation Incident & School Investigation Form



DETROIT PUBLIC SCHOOLS

This form is to be confidentially maintained in accordance with the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g.

School Personnel Completing Form _____ Position _____

Today's date ____/____/____ School _____ Assistant Superintendent _____

Person Reporting Incident Name _____

Telephone _____ - _____ - _____ E-mail _____

Place an X in the appropriate box:

- Student Student (witness/bystander) Parent/guardian Close adult relative School staff member

1. Name of student victim _____ ID # _____ Age _____
(Please print) (If more than one victim add separate sheet)

Days absent due to incident _____

2. Name(s) of alleged offender(s) (If known). (Please print)	Age	School (if known)	Is he/she a student? <input type="checkbox"/> Yes <input type="checkbox"/> No	Days Suspended Due to Incident
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total number of alleged offenders				

3. Where did the incident occur? Be specific (i.e., classroom, hallway, cafeteria, playground, bus). _____

4. When did the incident occur? Day: _____ Date: _____ Time: _____ AM/PM

5. What happened? Describe in detail. _____

6. Were there any witnesses? Yes No (Circle one) Provide name(s) and contact information. _____

7. List and attach any evidence of bullying or harassment. (i.e., letters, texts, photos, etc.) _____

8. Have you or the victim been bullied or harassed before by this person? Yes No (Circle one) If so, how many times? _____

9. Have you or the victim been bullied or harassed or witnessed bullying or harassment by this person before? Yes No (Circle One)
If so, how many times? _____

10. Was a report filed for the previous time(s)? Yes No (Circle one) When? _____

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature of Complainant/Witness _____

D P S Administrator Signature _____

Date _____

INVESTIGATION

1. Where did the incident happen (choose all that apply)? Date of investigation ____/____/____
- On school property
 - At a school-sponsored activity or event off school property
 - On a school bus
 - On the way to/from school
 - Electronic (email, facebook, twitter, text etc...)
2. Place an X next to the statement(s) that best describes what happened (choose all that apply):
- Any bullying, harassment, or intimidation that involves physical aggression
 - Getting another person to hit or harm the student
 - Teasing, name-calling, making critical remarks, or threatening, in person or by other means
 - Demeaning and making the victim the object of jokes
 - Making rude and/or threatening gestures
 - Excluding or rejecting the student
 - Intimidating (bullying), extorting, or exploiting
 - Spreading harmful rumors or gossip
 - Electronic communication (specify) _____
 - Other (specify) _____
3. What actions were taken to investigate this incident? (choose all that apply)
- | | |
|---|---|
| <input type="checkbox"/> Interviewed student victim | <input type="checkbox"/> Interviewed teachers and/or school staff |
| <input type="checkbox"/> Interviewed alleged offender(s) | <input type="checkbox"/> Interviewed student victim's parent/guardian |
| <input type="checkbox"/> Interviewed witnesses | <input type="checkbox"/> Interviewed alleged offender's parent/guardian |
| <input type="checkbox"/> Witness statements collected in writing | <input type="checkbox"/> Examined physical evidence |
| <input type="checkbox"/> Interviewed school nurse | <input type="checkbox"/> Conducted student record review |
| <input type="checkbox"/> Reviewed any medical information available | <input type="checkbox"/> Obtained copy of police report |
| <input type="checkbox"/> Other (specify) _____ | |
4. Why did the bullying, harassment, or intimidation occur (alleged motives)? (choose all that apply)
- Because of race
 - Because of national origin
 - Because of marital status
 - Because of sex
 - Because of sexual orientation
 - Because of gender identity
 - Because of religion
 - Because of disability
 - Because of physical appearance
 - To impress others
 - Just to be mean
 - Because of another reason (specify) _____
 - The reason is unknown
5. What corrective actions were taken in this case (choose all that apply)?
- None were required, this was a false allegation
 - None, the incident did not warrant any corrective action
 - Student conference
 - Student warning
 - Letter of apology
 - Mediation
 - Counseling
 - Parent letter
 - Parent phone call
 - Parent conference
 - Detention
 - In-school suspension
 - Out-of-school suspension
 - Expulsion
 - Other (specify) _____

6. Additional pertinent information gained during the interview _____

_____ (Attach a separate sheet if necessary)

7. Investigator notes _____

_____ (Attach a separate sheet if necessary)

Individual Completing Form Signature ____/____/____
Date

Please submit all Reports of Bullying and Harassment to the Office of Student Code, Risk Management, and the Office of the General Counsel

Office of Student Code (313) 748-6350/51 (313) 596-3691(fax)
Office of Risk Management (313) 873-0880 (313) 873-0872(fax)
Office of the General Counsel (313) 873-4528 (313) 873-4564(fax)