INCIDENT REPORTING FORM DIGNITY FOR ALL STUDENTS ACT

It is the Policy of the Mayfield Central School District to provide a school environment that is free from harassment, bullying and discrimination for all students. Harassment or discrimination of a student by another student or by school employees on school property or at a school function on the basis of actual or perceived race, color, weight, national origin, ethnic group, religion, religious practice, disability, sexual orientation, gender or sex is expressly prohibited. If you believe you, or someone else, has been the target of harassment, bullying, cyber-bullying and/or discrimination, please use this form to report all allegations.

Person completing th	nis form:	Date:
Relationship to Comp	olainant:	
□Student	□Staff Member □Parent	□Administrator □Other
Contact information] Address:	for Person making this con	pplaint:
Phone:	E-mail:	
Name of Complainant/Target(s):		
Name of alleged Offender(s)		
	Time of Incident(s)	
If multiple dates and times, list all. What was your involvement in the incident?		
\Box I was directly involved \Box I saw/observed the incident \Box I heard about the incident		
Location of Incident: (check all that apply- identify specific location if possible)		
□Classroom	□Hallway/Stairs	Restroom
□Playground	□Locker Room	Cafeteria
□Gymnasium		
□Athletic Field	□Parking Lot	
□School Sponsored Event □ Other:		
		\Box on the way home from school
□Internet	Electronic Communication (text/IM/Phone/etc.)	

Type of Incident (check all that apply)

What was your involvement in the incident?

Physical Contact (kicking, punching, spitting, tripping, pushing, taking belongings, hitting, etc.)

□ Verbal threats (gossip, name-calling, put-downs, teasing, taunting, threatening, etc.)

□ **Psychological** (non-verbal actions (gestures, notes of threat), spreading rumors, social exclusion, intimidation, etc.)

□ 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, etc.)

Other (describe): _____

Who was involved in the incident?

□ Student □ Employee □Both student and employee □Visitor/Guest to School **Describe what happened**- (be as specific as possible) - what did the alleged aggressor do or say? Include/attach copies of any documentation or evidence, such as text messages, e-mails, written statements, photos, etc., if possible: ______

Witnesses? (Who was around or nearby who may be able to provide information) *Identify what characteristics* [actual or perceived] of the complainant which were the subject of the discriminatory or harassing behavior: (check all that apply): □Color □National Origin □Ethnic Group □Weight □Gender Identity/Expression □Gender □Sex □Sexual Orientation Disability Religion Religious Practice Other (please list): Was/Is the student absent from school as a result of the incident? Number of days absent: \square No \square Yes *Does this situation continue to occur?* \Box No □Yes Any known prior documented incidents by alleged aggressor? \Box Yes \Box No If yes, have incidents involved the Target identified above? □Yes □No

What do you think should be done about the situation?

Retaliation or threats of retaliation against any person involved in an investigation of harassment or discrimination (including those who initiate the complaint, participate or conduct the investigation or are involved or testify related to the complaint) is a violation of the law. If you believe that you have been subjected to retaliation on the basis of your cooperation with the investigation, please notify the building's Dignity Act Coordinator:

⁻ Elementary School: Principal Dr. Patricia Paser, paser.patricia@mayfieldcsd.org, 518-661-8222, Option 3

⁻ High School: Principal Matthew Morgan, morgan.matthew@mayfieldcsd.org, 518-661-8222, Option 2

⁻ District-Wide: Executive Principal John Bishop, <u>bishop.john@mayfieldcsd.org</u>, 518-661-8222, Option 3