

BULLYING INVESTIGATION FORM

Date: _____

1. Name of person investigating alleged incident(s): _____

Position/Title of investigator: _____

Name of complainant/person reporting bullying: _____

Name(s) of alleged target(s): _____

Complainant/reporter is (circle one):

Student Parent/Guardian School Employee/Coach/Advisor Volunteer

Other: _____

Name(s) of alleged bully(ies): _____

Name(s) of potential witnesses: _____

2. Relationship between alleged target(s) and bully(ies): _____

3. Where did the alleged incident(s) occur (check one or more):

- _____ on school property (including a school bus)
- _____ at a school sponsored activity
- _____ through use of technology
- _____ elsewhere

Time(s) and locations(s) of alleged incident(s): _____

4. Is this a first occurrence or has the same or similar occurred previously? Yes No

5. Interview of complainant/reporter's description of alleged incident(s): _____

6. Interview of alleged bully(ies): _____

7. Witnesses interviewed and summary of witness information provided: _____

8. Further evidence of bullying (videos, photos, e-mail, letters, etc.): _____

9. Is the alleged bullying substantiated (i.e., does the alleged conduct meet the definition of bullying as articulated in School Committee policy)? Yes No

10. Nature of harm incurred:

- Physical harm to student or damage to student's property
- Student's reasonable fear of physical harm or damage to property
- Infringement of student's right at school

11. Conduct resulting in harm (in item 10 above) is on the basis of:

- National origin/ancestry/ethnicity
- Religion
- Physical, mental, emotional or learning disability
- Sexual orientation
- Gender/gender identity/expression
- Age
- Socioeconomic status
- Family status
- Physical appearance
- Weight
- Other distinguishing personal characteristics

12. Summary of investigation/explanation of findings:

13. Recommended disposition and/or recommended disciplinary action (including alternative discipline, support for targeted student, other intervention/referral):

14. Recommendation of report to law enforcement? Yes No

_____ Potential criminal violation
_____ Potential civil rights violation

Signature of investigator

Date

Printed name of investigator

Date copy to building principal/designee (if investigator is not building principal): _____

Date copy to Superintendent: _____