

STUDENT INCIDENT REPORT FORM

Date: _____ Administrator filing report: _____

Student: _____ School Site: _____ Grade: _____

The following incidents apply to this report:

- | | |
|---|--|
| ☐ academic dishonesty | ☐ network user violation |
| ☐ administrative conference with student | ☐ open defiance |
| ☐ assault | ☐ possession or use of lethal weapons |
| ☐ breaking of school rules repeatedly | ☐ possession, consumption, sale, or being under the influence |
| ☐ bullying/intimidation (verbal or physical) | ☐ profanity/obscenity |
| ☐ bus conduct | ☐ public display of affection |
| ☐ conduct that threatens safety of others | ☐ pushing/shoving/kicking/punching |
| ☐ dishonesty/lying | ☐ sexual harassment |
| ☐ disrespect of faculty or staff | ☐ stealing |
| ☐ disruption of educational process | ☐ student conflict |
| ☐ dress code violation | ☐ tardies, excessive |
| ☐ excessive unauthorized absences | ☐ temper tantrum |
| ☐ extortion | ☐ theft/possession of stolen property |
| ☐ failure to attend assigned detention | ☐ threats |
| ☐ failure to comply with reasonable request | ☐ tobacco use |
| ☐ fighting | ☐ truant |
| ☐ harassment | ☐ unruly conduct that disrupts school |
| ☐ horseplay | ☐ vandalism |
| ☐ inappropriate behavior | ☐ vehicle violation |
| ☐ indecent exposure | |
| ☐ medication policy violation | |

If this is a bullying incident, has the student stated to the person either orally or in writing that he/she feels this behavior is inappropriate and unwelcome and he/she would like the behavior to stop? ☐ Yes ☐ No

Student's signed statement of incident is attached to this report.

RESOLUTION:

Administrator signature _____

Date _____

HARASSMENT/BULLYING INCIDENT REPORT FORM

Date: _____ Time: _____ Room/Location: _____

Student(s) Initiating Bullying/Harassment:

_____ Grade: _____ Class: _____

_____ Grade: _____ Class: _____

Student(s) Affected:

_____ Grade: _____ Class: _____

_____ Grade: _____ Class: _____

Type of Harassment Alleged:

Racial _____ Sexual _____ Religious _____ Other _____

Check all spaces below that apply. Adult stated or identified inappropriate behaviors as:

_____ Name Calling

_____ Stalking

_____ Inappropriate Gesturing

_____ Staring/Leering

_____ Writing/Graffiti

_____ Threatening

_____ Taunting/Ridiculing

_____ Inappropriate Touching

_____ Other _____

_____ Spitting

_____ Demeaning Comments

_____ Stealing

_____ Damaging Property

_____ Shoving/Pushing

_____ Hitting/Kicking

_____ Flashing a Weapon

_____ Intimidation/Extortion

Describe the incident:

Witnesses Present: _____

Physical evidence: Graffiti _____ Notes _____ E-mail _____ Web sites _____ Video/audio tape _____

Other _____

Staff signature _____

Parent(s) contacted: Date _____ Time _____

Administrative response taken:
