



BULLY/HARASSMENT INCIDENT INVESTIGATION FORM

Name of person completing report/investigating:

Incident date: _____ **Report date:** _____

Name of person being interviewed: _____

Role:

Student allegedly bullied Student who allegedly bullied Witness/bystander

Parent Notified: No Yes Date: _____ Time: _____ Person contacting: _____

The following items were addressed:

- Confidentiality Review of school policy Review of non-retaliation
 Consequences for false information Investigation procedures
 Safety plan (including possible involvement of law enforcement)

Specifics:

What exactly happened, when (date and time), to whom, how, where (location)?

What is the relationship between the people involved?

Have there been previous incidents of which you are aware?

Have any previous incidents been reported? If so, to whom/how?

What has the student who was allegedly bullied done to deal with the issue? What was the response of this person?

Were there any bystanders/witnesses who would have information? If so, what are their names? How were they involved?

What would be a positive outcome to this situation?

Plans for the future: (as needed for both alleged bully and bullied)

Student _____

Date _____

Administrator _____

Date _____

Identify each of the following 18 categories (real or perceived) for which the student is reported to have been bullied/harassed. Check all that apply.

- Age
- National Origin
- Physical Attributes
- Political Party Preference
- Other (Please Specify):
- Color
- Marital Status
- Physical/Mental Abilities
- Socioeconomic Status
- Race
- Religion
- Sexual Orientation
- Creed
- Gender Identity
- Political Belief
- Familial Status
- Sex

Method of bullying/harassment (check all that apply).

- Electronic Communication
- Social/Relational (ostracizing, exclusion)
- Other (Please Specify):
- Written Communication
- Verbal
- Physical

Location of incident (check all that apply).

- Bus
- At Lockers
- Other (Please Specify):
- Hallway
- Playground
- Classroom
- Extra curricular activity (on/off campus)
- Locker room
- Gym
- Cafeteria
- Bathroom

Person(s) reported to have bullied/harassed:

If district student, enter student's state ID:

Building:

Grade:

Identify where the person(s) reported to have been bullied/harassed from.

- District Student
 - Student from another district
 - School Staff Member
 - Volunteer
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TO BE COMPLETED BY SCHOOL COUNSELORS AND ADMINISTRATORS ONLY

If the Iowa Anti-Bullying/harassment law was violated, check all of the reasons that apply.

- Was violated because conduct places the student in reasonable fear of harm to the student's person or property.
- Was violated because conduct has a substantially detrimental effect on the student's physical or mental health.
- Was violated because conduct has the effect of substantially interfering with the student's academic performance.
- Was violated because conduct has the effect of substantially interfering with the student's ability to participate in or benefit from the services, activities, or privileges provided by a school.

Provide an explanation and/or additional information as to why one or more of the conditions were met:

If the Iowa Anti-Bullying/harassment law was not violated, check the box indicating that another law, school policy, or rule was violated or check the box indicating that no law, school policy, or rule was violated.

- Was NOT violated, nor was any other law/school policy/rule violated.
- Was NOT violated, but another law/school policy/rule violated.

Check all of the following consequences/remedial actions that apply.

- Verbal warning Written warning Parent(s) or guardian(s) notified
- Parent(s) or guardian(s) conference Signed agreement Counselor follow up
- Restricted privileges Specialized-seating assignment Individual Behavior Plan
- Suspension or expulsion-__days Bus Suspension-__days Law enforcement
- Community Service Student Conference Referral to Internal Team
- No consequences warranted
- Other(Please Specify):

Investigation Completed by: _____ **Date** _____