

# **BULLYING AND HARASSMENT INVESTIGATION REPORT FORM\***

\*This form is to be filled out whenever a formal complaint of bullying has been filed in writing, where a parent requests an investigation report, or where there has been an allegation of bullying based on a protected class and could constitute discriminatory harassment. Allegations of sexual harassment must follow the process established in Policy 4121, and the Sexual Harassment forms must be used.

	SCHOOL:			
Complainant's Name:				
Complainant's Grade Lo Respondent's Name(s):				
Respondent's Grade Le	vel:			
*If the incident	involves more responde	ents, please add othe	rs' names and grade levels here	2:
Date of parent/guardia	n notification:			·
Check the box(es) of th	e conduct investigated:			
Bullying	Cyberbullying	Discriminator	y Harassment (including sexual	misconduct)
Hazing	Retaliation			
If Discriminatory Haras harassment:	sment above is marked	, please check the fo	llowing box(es) to indicate the	basis of the
☐ Race/Color/ National Origin	Sex/Gender	☐ Religion	☐ Disability	

<b>Description of the complaint:</b> (Provide a brief summary of the incident(s)/conduct of Attach additional paper if needed.)	described by complainant, including the who, what, when, and where.
<b>Description of the response:</b> (Provide a brief summary of the incident(s)/conduct of allegations found in the complaint. Attach addition	described by the respondent, including any denial, admission, or clarification nal paper if needed.)
<b>Description of witness statements:</b> (Provide a brief summary of what each witness said,	by name. Attach additional paper if needed.)
Investigative Steps Taken:	
Interviewed <u>complainant</u> ?	Written <u>complainant</u> statement taken?*
Interviewed <u>respondent?</u>	Written <u>respondent</u> statement taken?*

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Interviewed witnesses (list names of witnesses and indicate whether written statement was taken for each. If necessary, attach additional witnesses on separate sheet.)

ger children are involved, not always practical.

Physical evidence reviewed. Mark all that are applicable:

Security camera footage

Police report

Social media posts

Students/s' cell phone(s) (Follow district policy with regard to searches of students' personal belongings)

Prior student history tags

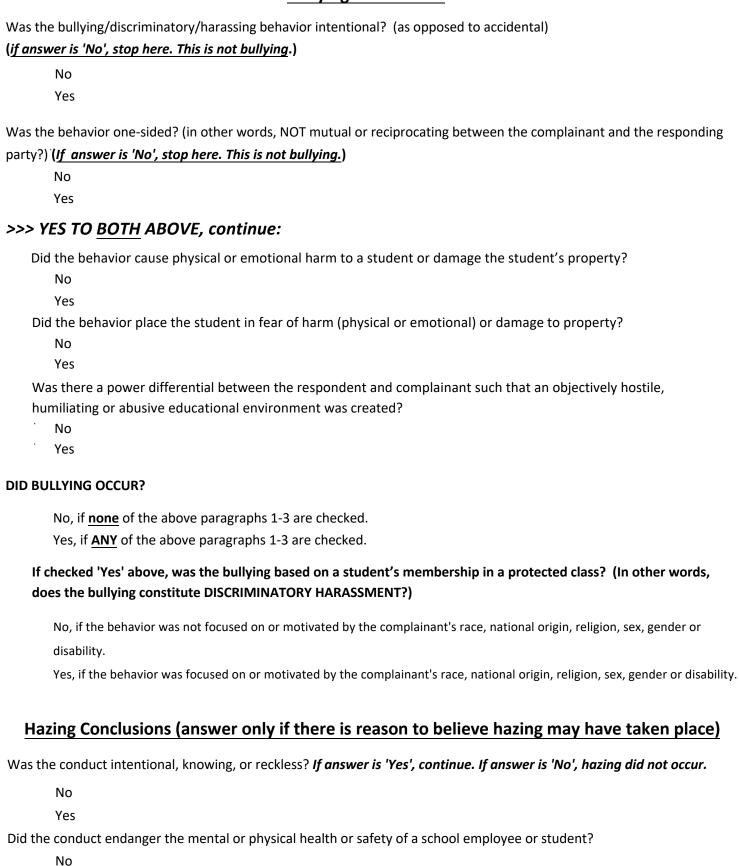
Other physical evidence reviewed not listed above:

### Other investigative steps not listed above:

### Findings of fact:

(Weigh the credibility of all evidence and make a determination about what happened. Summarize your findings here.)

### **Bullying Conclusions**



Yes

#### --continued: Hazing Conclusions (answer only if there is reason to believe hazing may have taken place)

Did the conduct involve any brutality of a physical nature, including but not limited to: whipping, beating, branding
calisthenics, bruising, electric shocking, placing harmful substance on the body, or exposure to elements?

No

Yes

Did the conduct involve consumption of food, alcoholic product, drug or other substance or physical activity that endangers the mental or physical health and safety of the student?

No

Yes

Did the conduct involve any activity that would subject a student to extreme mental stress, such as sleep deprivation, extended isolation from social contact?

No

Yes

Is the conduct such that a reasonable student might be subjected to embarrassment, shame or humiliation?

No

Yes

## >>> If answer is 'Yes' to ANY of the above, continue.

Was the conduct committed for the purpose of initiation into, admission into, affiliation with, holding office in, or as a condition for membership in a school or school sponsored team, organization, program, club, or event?

No

Yes

#### **DID HAZING OCCUR?**

No, if checked 'No' to the previous question. Yes, if checked 'Yes' to the previous question.

# Retaliation Conclusion (Answer only if retaliation is alleged)

Was the conduct intended as a retribution against a person for reporting Bullying?

No

Yes

Was the conduct intended to improperly influence the investigation of, or response to , a report of bullying?

No

Yes

#### **DID RETALIATION OCCUR?**

No, if checked 'No' to either of the above questions

Yes, if 'Yes' to either of the above questions

Recommendations:
(Make recommendations for appropriate disciplinary action or other restorative practice measures to rehabilitate the
respondent and deter future violations. If discriminatory harassment or sexual harassment occurred, make
recommendations to address the effects of the violation on the target. If applicable, recommend any system-wide
measures to eliminate harassment and discrimination.)
ATTACHMENTS: Please attach written statements and other critical documents to this Investigation Report
I hereby represent that I conducted the above-referenced investigation in a timely matter, with impartiality, and have made the above determinations to the best of my ability. I further represent that the information provided herein is true, correct, and complete to the best of my knowledge.
Dated this day of , 20
Name and Title
Nume and Title
. Unload this you out to Mustindant
<ol> <li>Upload this report to MyStudent.</li> <li>If complaint is written, provide one copy to victim (redact witness names</li> </ol>
and unrelated respondent recommendations).

3..If complaint is written, provide one copy to respondent (redact witness names and victim recommendations).