## CHICKASHA PUBLIC SCHOOLS: DISTRICT FORM

EI-R1-F1

## **BULLYING INCIDENT FORM**

Date:	e:Time:		Room/Location:		
Student(s	) Initiating Bul	lying/Harassmen	:		
			Grade:	Class:	
			Grade:	Class:	
Student(s	) Affected:				
			Grade:	Class:	
			Grade:	Class:	
Type of I	Harassment All	eged:			
Racial	Sexual	Religious	Other		
Check all spaces below that apply. Adult behaviors as: Name CallingStalkingInappropriate GesturingStaring/LeeringWriting/GraffitiThreateningTaunting/RidiculingInappropriate TouchingOther					
Witnesses	s Present:				

Physical evidence: GraffitiNo Video/audioOther	otesE-mailWeb sites		
Parent(s) contacted: Date	Time		
Administrative Determination of Inve	estigation:		
Bullying was substantiated	Bullying was not substantiated		
Disciplinary Actions Taken:			
Conference with student	Restriction of privileges		
Conference with parent	Involvement of local authorities		
In-School suspension	Referring student to appropriate social		
Detention	Suspension		
Behavioral Contract	Removal from activities		
Changing student's seat assignm			
	2 & up) other:		
Referring student to appropriate			
Require student to clean or straig	ghten items or facilities damaged by student's		
Requiring student to make finance	aial rastitution		
Requiring student to make imane	ciai restitution		
Parent notification of investigation ou of the investigation)	atcome: (occurs within 3 days of completion		
Target's Parent(s) contacted: Date	Time		
Alleged Bully's Parent(s) contacted:	DateTime		
Recorded in PowerSchool: Date			
Staff Signature:			

Adopted: September 14, 2020 Revised: