

Dignity Act Reporting Form

SOUTH JEFFERSON CENTRAL SCHOOL DISTRICT



"Home of Spartan Pride"

ELEMENTARY BUILDINGS

Wilson: (315) 583-5418
Mannsville: (315) 465-4281

DISTRICT OFFICE

PO Box 10
Adams, NY 13605
(315) 583-6104
Fax: (315) 583-6381

OTHER OFFICES

High School: (315) 232-4531
Middle School: (315) 232-4532
Transportation: (315) 583-5221

School: _____

Today's Date: _____

Name of person filing report: _____

Date/Time of Incident: _____

Identification of person filing report: (Check all that apply)

- | | | |
|--|--|---|
| <input type="checkbox"/> I am the alleged victim | <input type="checkbox"/> I am the parent or in parental relation to the alleged victim | |
| <input type="checkbox"/> I am a student | <input type="checkbox"/> I am a staff member | <input type="checkbox"/> I am a witness |
| <input type="checkbox"/> It was reported to me | <input type="checkbox"/> Other | |

The best way to reach me is:

Phone Number: _____

Email: _____

Who is the Alleged Victim?

Student's Name: _____

Student's Grade: _____

Alleged Offender (s)?

Student's Name: _____

Student's Grade: _____

Student's Name: _____

Student's Grade: _____

The offender is not known

Names of possible witnesses: _____

Type of incident: (Check all that apply)

- Physical Verbal Threat Psychological Abuse Cyberbullying Other

Were there any adults in the area when this happened, what did they do?

I would best describe the incident as related to the students: (Check all that apply)

- Weight (over/under) Height Physical Feature Color National Origin Ethnic Group Clothing
 Disability Illness/Allergy Positive Academic Achievement Religion Religious Practice Sexual
Orientation Gender Sex Poverty Other: _____

The incident (s) have occurred in the following location (s): (Check all that apply)

- Classroom Hallway/Locker Cafeteria Playground School Bus Gymnasium Locker Room
 Library At an off campus school event Internet/Social Media Athletic Field Off School Property
Other: _____

What was the impact on the student:

Was the student absent from school? No Yes How many days was the student absent? _____

Explain in as much detail as possible what happened.
