INCIDENT REPORTING FORM DIGNITY FOR ALL STUDENTS ACT

It is the Policy of the Fort Edward Central School District to provide a school environment that is free from harassment, bullying and discrimination for all students. Harassment or discrimination of a student by another student or by school employees on school property or at a school function on the basis of actual or perceived race, color, weight, national origin, ethnic group, religion, religious practice, disability, sexual orientation, gender or sex is expressly prohibited. Contact Information Person Completing this Form: _____ Date: _____ Address: Name: Telephone number(s): _____ E-mail Address: Relationship to the Student on whose behalf you are reporting: (Select one) € Self €Friend/Classmate €Teacher/Administrator €Parent €Relative €Other (please explain) Incident(s)- Description and Location (*attach additional pages, as necessary*) Name of Targeted Student: School Attending: Age/Grade: _____ Name of Alleged Aggressor(s) (if known): School Attending: _____ Age/Grade/Position: _____ Relationship between the Target and Aggressor (if known) Date(s) of Alleged Incident(s): Which Building? **Location of Incident Within Building**: (*circle all that apply*) Hallway/Stairs (where) _____ Restroom (where) _____ Classroom Locker Room (where) Lunchroom Athletic Field Playground Parking Lot Field Trip (on school property/off school property) School Sponsored Event (list) Other: School Bus (on the way to school/on the way home from school)

Please describe the Incident:

Please Identify the Behav	ior(s) or Actions (hearwad ar Witnessa	d from the Aggressor(s
(check all that apply)	ior(s) of Actions C	voserved of writilesse	a nom the Aggressor(s
€ Teasing	€Name-Calling	€Rude Gestures	€Hitting/Punching
€Threatening Gestures	_		
€Kicking/Tripping	€Excluding /Rej	ecting the Student	€Graffiti
€Mimicking/Imitating or N			
€Stealing	€Putting the Stud	lent Down/Making the	Target of Jokes
€Getting someone else to t			
€Other:			
Please Identify any Potent Frequency of Incident(s):			
	· · · · ·		
Please identify what cha	racteristics [actual	or perceived] of the	Targeted student whi
were the subject of the dis	criminatory or har	assing behavior: (che	ck all that apply):
€Race €Color	ENational	Origin EEthnig	Froun E Woight
€Gender Identity/Expression			€Sexual Orientati
€ Disability € Religion			
C Disconity Civengion		ee couler (please lis	

Was there any Physical Injury as a Result of the Incider	nt? Y	Ν
If you answered yes above, please describe:		
Did you Report this information to the School? Y	Ν	
To whom?	When?	

Retaliation or threats of retaliation against any person involved in an investigation of harassment or discrimination (including those who initiate the complaint, participate or conduct the investigation or are involved or testify related to the complaint) is a violation of the law. If you believe that you have been subjected to retaliation on the basis of your cooperation with the investigation, please notify the Dignity Act Coordinator at (518) 747-4529.