

Westfield Academy & Central School

DASA Incident Reporting Form

I. To be completed by person reporting the incident (or the person receiving the complaint and/or investigating the incident)

School District:	School:		
Dignity Act Coordinator:	Position	:	
Foday's Date:Name of Person Reporting Incident:			
Role of person reporting incide	ent (Check one)		
□ Student Target □ Student (with	ness) □ Parent/Guardian □ Staff	f Member 🗆 Other	
Phone: l	Email:		
Name of Target: (student being	g bullied, harassed, or discrin	ninated against)	
Name(s) of Alleged Offender(s):		
Date(s) and Time(s) of Inciden	t:		
What was your involvement in	the incident?		
□ I was directly involved in the i	incident	dent D I heard about the incident	
Where did the incident happen	n? (Check all that apply) □ Cafeteria	□ On a school bus	
Classroom	□ Gym	□ Off school property	
□ Hallway	□ Locker Room	Electronic Communication	
Bathroom	□ At a school function	Other (describe):	

Type of incident (*Check all that apply*)

□ Physical contact (kicking, punching, spitting, tripping, pushing, taking belongings)

□ Verbal threats (gossip, name-calling, put-downs, teasing, being mean, taunting, making threats)

□ Psychological (non-verbal actions, spreading rumors, social exclusion, intimidation)

□ Abuse (actions or statements that put an individual in fear of bodily harm)

□ Cyberbullying (misusing technology/social media to harass, tease, threaten, post pictures (sexting))

□ Other (describe):

Who was involved in the incident?

 \Box Student

Employee

 \square Both student and employee

Describe the specific nature of the incident. What happened? (*Be as specific as possible*). What did the alleged offender say or do? Include any copies of text messages, emails, etc. if possible.

(Add extra pages if needed)

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

Types of bias i	nvolved (if known)	: (Check all that apply)		
□ Race		Religion	\Box Sex	
Color		Religious practice	□ Other (describe)	
□ Weight/size		Disability	(desende)	
□ National orig	in	□ Sexual orientation		
Ethnic group		Gender		
Names of others who may have witnessed the incident:				
Was the stude	nt absent from scho	ool as a result of the inc	cident?	
□ No	□ Yes Number of d	ays student was absent:_		
Does the situat	tion continue to occ	eur? □ Yes	□ No	
What do you t	hink should be don	e about the situation?		
			Coordinator, counselor, or other	
stan member	whoever you are n	iosi comortable with)	for information or assistance at any	

time.

- Amy Brinkley Guidance Counselor <u>abrinkley@westfieldcsd.org</u>
- Ashley Raynor School Psychologist <u>araynor@westfieldcsd.org</u>
- DeAnn Shelters Social Worker <u>dshelters@westfieldcsd.org</u>
- Molly Anderson Elementary Principal <u>manderson@westfieldcsd.org</u>
- Corey Markham MS & HS Principal <u>coreymarkham@westfieldcsd.org</u>