Plainedge School District- Dignity for All Students Act (DASA) Responding to Incidents: Bullying, Harassment and/or Discrimination DASA Complaint Form

To be completed by the person reporting the incident (or the person receiving the complaint and/or investigating the incident) and submitted to the School Administration or the Dignity Act Coordinator for your School).

Ī	Building/School:				
	Date:				
	Name of person reporting	g incid	dent:		
	Role of person reporting	ncide	ent (<i>Check One</i>)		
	Anonymous			Student	Witness
	Student Target			Staff Me	mber
L	Parent/Guardian			Other	
	Phone:		Ema	ail:	
Na	ame of target:				
Na	ame(s) of alleged offende	(s):			
Da	ate and time of incident:				
W	hat was your involvemen	t in th	ne incident?		
	Directly involved.				
	Observed the incident.				
	I heard about the incide	nt.			
W	here did the incident hap	pen?	(Check all that app	ly)	
	School Property		Cafeteria		Hallway
	Classroom		Gym		On a School Bus
	Bathroom		At a School Functi	ion	Locker Room
	Off School Property		Electronic		Other

Physical Contact (Kicking, punching, 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) Other (describe) 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. (Attach notes) If there were any adults in the area when this happened, what did they do? Types of bias involved (if known): (Check all that apply) Race Color Weight/Size National Origin Ethnic Group Religion Religious Practice Disability Sexual Orientation Gender Sex Other Name(s) of others who may have witnessed the incident: Vas the student absent from school as a result of the incident? No Yes, # of days student was absent describe the impact this incident has had on the student (target):	what type of incident	occurred? (Check all that apply)	
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) Other (describe) 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. (Attach notes) If there were any adults in the area when this happened, what did they do? Types of bias involved (if known): (Check all that apply) Race Color Weight/Size National Origin Ethnic Group Religious Practice Disability Sexual Orientation Gender Sex Other Name(s) of others who may have witnessed the incident? No _Yes, # of days student was absent Vas the student absent from school as a result of the incident? _ No _Yes, # of days student was absent	Physical Contact (K	icking, punching, tripping, pushi	ng, taking belongings)
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Religious Practice Gender Sex Other Name(s) of others who may have witnessed the incident: Vas the student absent from school as a result of the incident? NoYes, # of days student was absent	Types of bias involv	ed (if known): <i>(Check all that ap</i>	ply)
Gender Name(s) of others who may have witnessed the incident: Vas the student absent from school as a result of the incident? NoYes, # of days student was absent _	Types of bias involv	ed (if known): <i>(Check all that ap</i>	weight/Size
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oes the situation continue to occur? No Yes	Types of bias involved Race National Origin Religious Practice Gender Name(s) of others who management of the student absent from	Color Ethnic Group Disability Sex have witnessed the incident:	Weight/Size Religion Sexual Orientation Other