

**RSU #16  
BULLYING/HARASSMENT INVESTIGATION FORM**

Date Complaint Received: \_\_\_\_\_ Date Complaint Assessed: \_\_\_\_\_

Date Investigation Commenced: \_\_\_\_\_ Date Investigation Completed: \_\_\_\_\_

1. Name of person investigating alleged incident(s): \_\_\_\_\_  
Position/title of investigator: \_\_\_\_\_  
Name of complainant/person reporting bullying: \_\_\_\_\_  
Name(s) of alleged target(s): \_\_\_\_\_  
Complainant/reporter is (circle one): ~~Student~~ ~~Parent~~ ~~School Employee~~ ~~Coach/Advisor~~ ~~Volunteer~~  
Other: \_\_\_\_\_  
Name(s) of alleged bully(ies)/harasser: \_\_\_\_\_  
Name(s) of potential witnesses: \_\_\_\_\_

2. Relationship between alleged target(s) and bully(ies)/harasser: \_\_\_\_\_

3. Did the alleged incident(s) occur (check one or more):

- \_\_\_\_\_ on school property (including a school bus)
- \_\_\_\_\_ at a school sponsored activity
- \_\_\_\_\_ through use of technology
- \_\_\_\_\_ elsewhere

Time and location(s) of incident(s): \_\_\_\_\_

4. Is this a first time occurrence or has the same or similar occurred previously? \_\_\_\_\_

5. Interview of complainant/reporter's, description of alleged incident(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date and Time of Interview: \_\_\_\_\_

6. Interview of alleged bully(ies)/harasser:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date and Time of Interview: \_\_\_\_\_

7. Name(s) of potential witnesses, if any:

\_\_\_\_\_

8. Witnesses interviewed and summary of witness information provided:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date and Time of Interview: \_\_\_\_\_

9. Further evidence of bullying (videos, photos, email, letters, etc.):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Is the alleged bullying/harassment substantiated, i.e., does the alleged conduct meet the definition of bullying or harassment as articulated in Board policy? Yes \_\_\_\_\_ No \_\_\_\_\_

11. Nature of harm incurred:

- \_\_\_\_\_ Aggressive/offensive communication to student/staff
- \_\_\_\_\_ Physical harm to student/staff or damage to student's/staff's property
- \_\_\_\_\_ Student's/staff's reasonable fear of physical harm or damage to property
- \_\_\_\_\_ Infringement of student's/ staff's rights at school

12. Conduct resulting in harm (in item 11 above) is on the basis of: (\*Notify Affirmative Action/Title IX Officer)

- |                                                          |                                                     |
|----------------------------------------------------------|-----------------------------------------------------|
| _____ * National origin/ancestry/ethnicity               | _____ * Age                                         |
| _____ * Religion                                         | _____ * Socioeconomic status                        |
| _____ * Physical, mental, emotional, learning disability | _____ * Family status                               |
| _____ * Sexual orientation                               | _____ Physical appearance                           |
| _____ * Gender/gender identity/expression                | _____ Weight                                        |
|                                                          | _____ Other distinguishing personal characteristics |

13. Summary of investigation/Explanation of findings:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Recommended disposition and/or recommended disciplinary action (including alternative discipline, support for targeted student, other intervention/referral)

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Has the event been entered in NEO? Yes \_\_\_\_\_ No \_\_\_\_\_

15. Recommendation of report to law enforcement? Yes \_\_\_\_\_ No \_\_\_\_\_

16. Potential civil rights violation? Yes \_\_\_\_\_ No \_\_\_\_\_

17. List any other investigators used for this investigation:

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Signature of investigator: \_\_\_\_\_

(If investigator is not building principal) Date copy to principal on: \_\_\_\_\_

Date Copy to Superintendent: \_\_\_\_\_

\*If Harassment Complaint,

Date and Time Affirmative Action/Title IX Officer Notified: \_\_\_\_\_