

Part II – Investigation

1. Investigator(s): _____ Position(s): _____
2. Interviews:
- | | | |
|--|-------|-------|
| <input type="checkbox"/> Interviewed aggressor | Name: | Date: |
| <input type="checkbox"/> Interviewed target | Name: | Date: |
| <input type="checkbox"/> Interviewed witnesses | Name: | Date: |
| | Name: | Date: |
3. Any prior documented incidents by the aggressor? Yes No
4. If yes, have incidents involved target or target group previously? Yes No
5. Any previous incidents with findings of BULLYING, RETALIATION? Yes No

Summary of Investigation:

(Please use additional paper and attach to this document as needed.)

Part III – Conclusions from the Investigation

1. Finding of bullying or retaliation:
- | | |
|--|---|
| <input type="checkbox"/> Yes <i>(please check one below)</i> | <input type="checkbox"/> No <i>(please check one below)</i> |
| <input type="checkbox"/> Bullying | <input type="checkbox"/> Incident documented as |
| <input type="checkbox"/> Retaliation | <input type="checkbox"/> Discipline referral only |
2. Contacts:
- | | |
|--|--|
| <input type="checkbox"/> Target's parent/guardian Date: | <input type="checkbox"/> Aggressor's parent/guardian Date: |
| <input type="checkbox"/> District Equity Coordinator (DEC) Date: | <input type="checkbox"/> Law Enforcement Date: |
3. Action Taken:
- | | | | |
|---|------------------------------------|--|--------------------------------|
| <input type="checkbox"/> Loss of Privileges | <input type="checkbox"/> Detention | <input type="checkbox"/> Suspension | <input type="checkbox"/> Other |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Referral | <input type="checkbox"/> Saturday School | |
4. Describe Safety Planning:

Follow-up with Target: scheduled for _

Initial and date when completed:

Follow-up with Aggressor: scheduled for _

Initial and date when completed:

Date Report forwarded to Principal:

Date Report forwarded to Superintendent:

Signature and Title:

Date: