Dignity for All Students Act Reporting Form

A student, parent/guardian or staff member may file a complaint of harassment, discrimination, intimidation, or bullying of a student pursuant to The Dignity Act regulations and school policy. This report includes the information necessary to conduct a thorough investigation of the alleged offense and take appropriate action. You may choose to report this information anonymously. All complaints will be treated in a confidential manner. Anonymous reports may limit the school’s ability to respond to the report.

Date: ______________________

School (Circle one): High School   Middle School   Lower School

Name of Person Reporting Incident: __________________________________________

Role of person reporting (Check one):

☐ Student Target
☐ Student Witness
☐ Parent/Guardian
☐ Staff Member
☐ Anonymous
☐ Other

Phone Number: __________________________  Email: __________________________

Name of Target(s) (student(s) being bullied or harassed):

__________________________________________

Name of alleged offender(s):

What was your involvement in the incident?

☐ I was directly involved in the incident
☐ I observed the incident
☐ I heard about the incident

Where did the incident take place? (Check all that apply):

☐ On school property
☐ Classroom
☐ Cafeteria
☐ Gym
☐ On a bus
☐ Off school property
☐ Hallway
☐ Bathroom
☐ At a school function
☐ Electronic Communication
☐ Playground
☐ Other (describe):

Type of Incident (Check all that apply):

☐ Physical contact (kicking, hitting, pushing, punching, tripping, spitting)
☐ Verbal (gossip, name-calling, put-downs, teasing, being mean, making threats)
☐ Psychological (spreading rumors, intimidation, social exclusion)
☐ Cyberbullying (misusing, technology/social media to harass, tease, threaten)
☐ Other (describe):
Who was involved in the incident *(Check all that apply)*:

- [ ] Student
- [ ] Employee
- [ ] Other:________________

Names of others who may have witnessed the incident:

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 or emails.

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

Was the student absent from school as a result of the incident?

- [ ] Yes: Number of days _______
- [ ] No

Type of bias *(if known)*: *(Check all that apply)*

- [ ] Race
- [ ] Religion
- [ ] Sex
- [ ] Color
- [ ] Religious practice
- [ ] Weight/Size
- [ ] Disability
- [ ] National Origin
- [ ] Sexual Orientation
- [ ] Ethnic Group
- [ ] Gender
- [ ] Other (describe):_____________________

You can contact the school’s leadership team, DASA Coordinator, counselor, or other staff member (whoever you are most comfortable with) for information or assistance at any time.

Please go to [www.tapestryschool.org](http://www.tapestryschool.org) for more information.