Candor Central School District DASA Incident Reporting Form  
(For District/School Files Only)

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

School: __________________________   Today’s date: _____________________

Name of person reporting incident: __________________________

Role of person reporting incident *(Check one)*
 □ Student Target □ Student (witness) □ Parent/Guardian □ Staff Member □ Other _____________

Phone: ___________________________ Email: __________________________

Name of target: (student being bullied, harassed, or discriminated against)
________________________________________________________________________

Name(s) of alleged offender(s): __________________________

Date(s) and time(s) of incident(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 happen? *(Check all that apply)*
□ On school property
□ Classroom
□ Hallway
□ Bathroom
□ Cafeteria
□ Gym
□ Locker Room
□ At a school function
□ On a school bus
□ Off school property
□ Electronic Communication
□ 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 (nonverbal 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?**
- Student □ Employee □ 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.**
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

**Names of others who may have witnessed the incident:**
________________________________________________________________________________
________________________________________________________________________________

**Was the student absent from school as a result of the incident?**
- No □ Yes Number of days student was absent: __________

**Does the situation continue to occur? □ Yes □ No**

**What do you think should be done about the situation?**
________________________________________________________________________________
________________________________________________________________________________

You can contact a school administrator, the Dignity Act Coordinator (HS - Mr. Aman / Elem. – Mrs. Volpicelli), a counselor, or other staff member (whoever you are most comfortable with) for information or assistance at any time.