

NEEDHAM PUBLIC SCHOOLS

Discrimination/Harassment Incident Report/Investigation Forms

1. Name of Reporter: _____

(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)

2. Check whether you are the: Target of the behavior Reporter (not the target)

3. Check whether you are a: Student Staff member (specify role) _____
 Parent Administrator Other (specify) _____

4. State your school or work site:

Needham High School Pollard Middle School High Rock School
 Broadmeadow School Eliot School Hillside School
 Mitchell School Newman School Other

5. Information about the Incident of Discrimination/Harassment:

Name of Target (of conduct) _____

Name of Aggressor (person alleged to have engaged in conduct): _____

Date(s) of Incident(s): _____

Time When Incident(s) Occurred _____

Location of Incident(s) (Be specific.) _____

Protected Classification involved: _____

6. Witnesses (List of people who saw the incident or have information about it):

Name: _____ Student Staff Other _____

Name: _____ Student Staff Other _____

Name: _____ Student Staff Other _____

Additional List of Witnesses is attached to this form.

*This form is intended for use in reporting incidents of discrimination/harassment related to a protected classification (i.e. race, color, religion, homeless status, national origin, age, sex, gender identity, sexual orientation, disability) as provided by the District's Discrimination/Harassment Grievance Procedure. As an exception, claims of sexual harassment that fall within the parameters of Title IX must be referred to the Title IX Coordinator for processing under the District's Title IX Grievance Procedure. *[Does the district also have a separate 504 grievance procedure?]*

7. Describe the details of the incident (including names of people involved, what occurred, and what each person did and said, including specific words used). Please use additional space on the back, if necessary.

8. Signature of Person** Filing this Report: _____ Date: _____

(Note: Reports may be filed anonymously; however, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report)

9. Form given to: _____ Position: _____ Date: _____

ITEMS BELOW ARE FOR ADMINISTRATIVE USE ONLY

Signature of person* receiving this report _____

Date Received: _____

** Consideration should be given to the following: (1) obligations to report the allegation to law enforcement or the Department of Children and Families (2) referral of any claims involving sexual harassment that fall within the parameters of Title IX to the Title IX Coordinator for processing under the District's Title IX Grievance Procedure (3) referral of allegations of repeated targeting of a student that does not involve a protected classification for processing under the District's Policy Prohibiting and Addressing Bullying, and (4) notification to special education or support staff when allegations involve students with IEPs or 504 plans in order to ensure compliance with laws applicable to such students.