

Challenging Behavior Reporting Form

Instructions

This form is for **students, parents or guardians of students enrolled in the school, and school employees** to report any alleged challenging behavioral incidents. Challenging behavior is behavior that negatively impacts school climate or interferes, or is at risk with interfering, with the learning or safety of a student or the safety of a school employee. This form should also be used to report alleged bullying incidents, meaning: unwanted and aggressive behavior among children in grades kindergarten to twelve, inclusive, that involves a real or perceived power imbalance.

Complete this form electronically, or in writing, or go to your school climate specialist (principal, vice principal, or other certified administrator) who will assist you with completing this form. All completed reports require a response from the school climate specialist, and every student, parent or guardian, and school employee **who completed this form** will receive a copy of the "Response Process(es) Notification Form" describing the action steps taken, within three (3) school business days after an assessment has been completed.

The school climate specialist will assess the facts of a challenging behavior incident and complete the "Response Process(es) Notification Form" (located on page 5 of this document). A confirmation of receipt of the "challenging behavior reporting form" will be provided to the individual who completed this form within **three (3) school business days**, and the behavioral assessment will be finalized within a reasonable amount of time.

If this is an emergency, and you feel that you or someone else is in imminent danger, please call 911, or your municipal police department.

Name: First _____ Last _____ or check here for any **student** who would like to submit anonymously.

I am a: Student, Parent and/or Guardian or School Employee

Email: _____

Phone Number: _____

Contact me by: Phone Email

Was this previously reported to any school employee prior to this report? If yes, identify to whom, when, and what was reported? _____

Where did the incident occur? _____

Check any boxes that apply.

- | | |
|--|--|
| <input type="checkbox"/> On school property | <input type="checkbox"/> On a school bus |
| <input type="checkbox"/> At a school-sponsored activity or off school property | <input type="checkbox"/> On the way to/from school |
| <input type="checkbox"/> Electronic communication, internet, and social media | <input type="checkbox"/> Outside of school |
| | <input type="checkbox"/> Other _____ |

Approximate date of incident (if known): _____

This form does not modify or eliminate any rights or obligations under state and federal laws, including, any constitutional and civil rights protections, or any applicable policies and procedures or collective bargaining agreements. All students' private and personal information will remain confidential throughout this process, subject to any wavier rights or disclosure responsibilities as permitted or required by law.

Please note: when a student exhibits challenging behavior, our priority is to ensure the safety of the students and the school, and to work with the student(s) to prevent the recurrence of such behavior, including making amends for any challenging behaviors that occurred. Federal law protects the privacy of each student. Therefore, you cannot be provided with any specific information concerning the student alleged to have engaged in the challenging behavior.

(continued)

Please describe what happened?

Of the following statement(s) check any that may describe or include what happened:

- | | |
|--|---|
| <input type="checkbox"/> Teasing, name-calling, intimidating, or threatening, in person or through electronic communication | <input type="checkbox"/> Making intimidating, and/or threatening gestures or remarks |
| <input type="checkbox"/> Spreading rumors or gossip | <input type="checkbox"/> Getting another person to do any of the behaviors listed above |
| <input type="checkbox"/> Hitting, kicking, shoving, spitting, hair pulling, or throwing something or other acts of physical aggression | <input type="checkbox"/> Unwanted contact of a sexual nature (verbal, non-verbal, physical) |

Do you believe that the reported instance(s) of challenging behavior was in reference to a student's perceived or actual age, ancestry, color, learning disability, marital status, intellectual disability, national origin, physical disability, mental disability, race, religious creed, sex, gender identity or expression, sexual orientation, and status as a veteran? If so, why?

If known, provide the name(s) of any witness(es) of the alleged incident: _____

Date form submitted: _____

***For school climate specialist use only:**

Date received by school climate specialist: _____

Signature of receipt by school climate specialist: _____

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