

DASA Incident Reporting Form

Albany Leadership Charter High School for Girls is committed to providing a safe, supportive environment free from harassment, bullying and discrimination for all students. Albany Leadership Charter High School for Girls encourages the involvement of staff, students, parents and community members in the implementation and reinforcement of the Dignity for All Students Act ("DASA").

If you believe you, or someone else, has been the target of harassment, bullying, cyber-bullying, and/or discrimination, please use this form to report all allegations.

School/ district personnel witnessing an incident or receiving a report of an incident must complete and submit this written report within two (2) school days. Note: School/ district personnel must also orally notify the principal, superintendent or their designee no later than one school day after witnessing or receiving a report of an incident.

All complaints will be treated in a confidential manner. Anonymous reports may limit the district's ability to respond to the complaint. A prompt and thorough investigation will be conducted for all incident reports.

Please complete this form and return it to:

Ms. Tara Smades, Social Worker
tsmades@albanyleadershiphigh.org
(518) 694-5300 ext. 226

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

Name of person reporting incident: _____

Date: _____

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: _____

What was your involvement in the incident?

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: _____

Are there observable changes in the target student's behavior? *(Check all that apply)*

- Grades
- Depression/ withdrawal
- Antisocial behavior
- Self-destructive behavior
- Self-esteem concerns
- Changes in social interactions
- Other: _____

Does the situation continue to occur?

- Yes
- No

What do you think should be done about the situation?

Actions Taken

What actions were taken in response to the incident described above (check all that apply)?

<input type="checkbox"/> Meeting with principal/ administrator	<input type="checkbox"/> Meeting with school counselor/ social worker	<input type="checkbox"/> Parent/ guardian called
<input type="checkbox"/> Increased supervision	<input type="checkbox"/> Verbal correction	<input type="checkbox"/> Conflict resolution group
<input type="checkbox"/> Awareness/ sensitivity session	<input type="checkbox"/> Referral to counseling services	<input type="checkbox"/> Community service (with parent permission)
<input type="checkbox"/> Referral to outside programming	<input type="checkbox"/> Afterschool meditation	<input type="checkbox"/> Inability to return to class

<input type="checkbox"/> Loss of extracurricular activities	<input type="checkbox"/> Full day ISS	<input type="checkbox"/> Half day ISS
<input type="checkbox"/> OSS	<input type="checkbox"/> Behavior plan	<input type="checkbox"/> Teacher removal?
<input type="checkbox"/> Notification of law enforcement	<input type="checkbox"/> Other:	<input type="checkbox"/>
<input type="checkbox"/> Prevention or intervention program or strategy, explain:		

Other previous discriminatory and/or harassing incidents, if any

Dates:

Descriptions:

Signature:

Date: