

# Otsego Northern Catskill BOCES

This form is to be submitted to the school's DASA Coordinator.

**John Taylor, OAOB DASA Coordinator**

Phone (607)286-7715, ext. 3101 Fax (607)286-9603

**Jesse Bright, NCOB DASA Coordinator**

Phone (607)588-6291, ext.1203 Fax (607)588-6808

## Dignity for All Students Act (DASA) Incident Report Form

### Part I: Initial Report

to be completed by person taking the initial report

Date and time of incident: \_\_\_\_\_

Person completing this form: \_\_\_\_\_

Person making the initial report: \_\_\_\_\_

Detailed description of the incident, including names of everyone involved:

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### Part II: Actions taken:

to be filled out by the Dignity Act Coordinator and Administrator

Person handling incident response: \_\_\_\_\_

Detailed description of the evidence gathered in the investigation:

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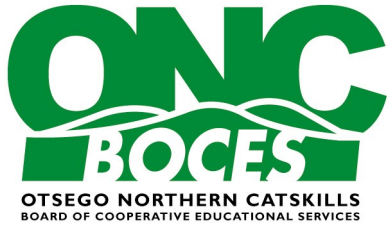
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This incident is categorized as:

\_\_\_\_\_ Verbal Harassment/Intimidation                      \_\_\_\_\_ Physical Harassment/Intimidation

\_\_\_\_\_ Social/Relational Harassment/Intimidation                      \_\_\_\_\_ Sexual Harassment/Intimidation

\_\_\_\_\_ Cyberbullying

\_\_\_\_\_ Other (describe): \_\_\_\_\_

\_\_\_\_\_ Unfounded at this time

Action(s) taken:

\_\_\_\_\_ Referral to Administrator for Disciplinary Action (describe): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Parent(s) contacted (describe): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Actions to prevent future incidents (describe): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date the investigation and actions were concluded: \_\_\_\_\_

Dignity Act Officer Signature: \_\_\_\_\_