



REGIONAL SCHOOL DISTRICT 13

ENGAGE • EMPOWER • THRIVE

5131.911 Form 2

Investigation Form

The purpose of this form is to provide a streamlined process to assess reported instances of challenging behavior.

This form is to be completed by the school climate specialist within a reasonable amount of time. Pursuant to the Federal Education Confidentiality Law (FERPA), students, parents or guardians, and school employees that completed the challenging behavior reporting form cannot receive a copy of this "Investigation Form" but will be provided with a copy of the "Response Process(es) Notification Form" after an assessment is completed.

Date "Challenging Behavior Reporting Form" received: _____

Today's Date: _____

Name of school climate specialist who received the report:

Were these events already reported to any school employee? If yes, please identify to whom, when, and what was reported

Name of school community member who is reporting the incident: (student, parent or guardian, school or district employee, bystander, anonymous):

Name of student or students who were allegedly subjected to the challenging behavior:

Name of person or persons who allegedly engaged in the challenging behavior:

Where did the alleged incident occur?

Date and time alleged incident occurred: (if known):

Description of the alleged incident: _____

What investigative processes occurred? Answer all of the following questions below. A single incident may require an assessment into multiple areas. Please check all that apply.

Was this investigated as bullying? YES ☐ NO ☐

Was this a verified act of bullying? YES ☐ NO ☐

Was this investigated as cyberbullying? YES ☐ NO ☐

Was this a verified act of cyberbullying? YES ☐ NO ☐

Was this investigated as teen dating violence? YES ☐ NO ☐

Was this verified teen dating violence? YES ☐ NO ☐

Was this investigated as an assault? YES ☐ NO ☐

Was this a verified assault? YES ☐ NO ☐

Was this investigated as an act of physical violence? YES ☐ NO ☐

Was this a verified act of physical violence? YES ☐ NO ☐

Was this investigated as a protected class violation/ harassment? YES ☐ NO ☐

Was this a verified protected class violation/harassment? YES ☐ NO ☐

Was this investigated as a Title IX violation? YES ☐ NO ☐

Was this a verified Title IX violation? YES ☐ NO ☐

Was this a verified act of challenging behavior not listed above? YES ☐ NO ☐

What was the response by the school climate specialist? (E.g., utilization of restorative practices, school-based threat assessment, safety plan, student support services) Additionally, provide the date of each response.

If applicable, please provide any additional notes, observations, or actions taken as a result of this incident:

Signature or E-signature of responding school climate specialist:

Printed name:

Date of response: _____