Swansea Public Schools
Bullying / Harassment / Aggression
INCIDENT FOLLOW-UP REPORT FORM

To be completed by Principal / Assistant Principal

Reporter's Name: ____________________________________________________________

Reporter's Position: __________________________________________________________

Name(s) of Target Interviewed: ________________________________________________

________________________________________________________________________

Was the aggressor’s behavior unwelcome, unwanted:  ☐ Yes  ☐ No

Did this incident create a hostile, intimidating or offensive educational environment:  ☐ Yes  ☐ No

Did this incident interfere with or limit the ability of the individual(s) to participate in or benefit from services, activities or privileges of school:  ☐ Yes  ☐ No

☐ supported him/her, i.e. affirmed his/her feelings
☐ brainstormed on solutions for avoiding aggression
☐ reminded him/her to report aggression
☐ recruited peers to befriend him/her
☐ notified teacher of target
☐ notified other staff, including: _____________________________________________

________________________________________________________________________

Interviewed student(s) accused of aggression.

Date: __________________________________________________________________

Name(s): __________________________________________________________________

Confirmation of incident (* if not witnessed by an adult ☐ Yes  ☐ No)

If No, proceed with interviewing witnesses.
Interview witnesses of aggression:  ☐ Yes  ☐ No

Date: __________________________________________________________________

Name: ____________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Discussion importance of reporting incidents of aggression:  ☐ Yes  ☐ No

Confirmation of incident by witnesses:  ☐ Yes  ☐ No
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INCIDENT FOLLOW-UP REPORT FORM (continued)

Aggression Confirmed:
☐ First Offense  ☐ Second Offense  ☐ Third Offense  ☐ Other ___________________________

Undisputed facts: __________________________________________________________________________________________

Harassment / bias indicators discovered: __________________________________________________________________________________________

Motivation and intent based on bias / harassment indicators: __________________________________________________________________________________________

Type of harassment / discrimination / bullying confirmed: __________________________________________________________________________________________

Intervention / consequence administered (refer to Intervention Consequences Chart): __________________________________________________________________________________________

Informed / reviewed with perpetrator what will happen if behavior continues  ☐ YES  ☐ NO

“Think About It Form” completed: ☐ YES  ☐ NO

Date: ________________________________

Witnessed By: ________________________________

Notified parent of accused: ☐ YES  ☐ NO

(When notifying parents, be conscious of pointing out any positive behaviors exhibited by student, i.e.; telling the truth, demonstrating remorse, etc.)

Notification of teacher / staff interacting with accused: ☐ YES  ☐ NO

Name(s): ________________________________

________________________________________ 

________________________________________ 

________________________________________

Referral for counseling: ☐ YES  ☐ NO

Additional comments / Information:

Remedial action steps recommended for school community:

Once the “Incident Report Form”, “Follow-Up Form”, “Parent Communication Letter”, “Think About It Form” and “Investigation Form” are completed, staple them together and file them in a secure location; preferably in The Administration Office.