415 FORM: REPORT OF DISCRIMINATION, HARASSMENT, VIOLENCE, BULLYING AND OTHER OFFENSIVE BEHAVIOR

Type of Prohibited Conduct Being Reported:
( ) DISCRIMINATION ( ) HARASSMENT ( ) VIOLENCE ( ) OTHER OFFENSIVE BEHAVIOR
( ) BULLYING ( ) RETALIATION

On the Basis of: (check all that apply)
( ) none ( ) race ( ) creed ( ) sex ( ) marital status ( ) national origin
( ) age ( ) color ( ) religion ( ) familial status ( ) public assistance
( ) disability ( ) ancestry ( ) sexual or affectional orientation ( ) gender identity and expression

Saint Paul Public Schools (the District) commits to supporting and maintaining a respectful learning and work environment that is free from discrimination, harassment, violence, and other offensive behavior based on an individual's race, creed, sex, marital status, national origin, age, color, religion, ancestry, status with respect to public assistance, sexual or affectional orientation, gender identity and expression, familial status, or disability.

The District prohibits discrimination, harassment, violence, or other offensive behavior by or toward a student, District employee, or third party in all District environments including all academic, extra-curricular, co-curricular, and District-sponsored activities on District property, including but not limited to schools, the school bus, school functions, or District-sponsored events held at other locations. The District prohibits retaliation for good faith reporting of such conduct.

District Policy 415.00 and Procedure 415.00.01 define various types of harassment, violence, and other offensive behavior. They also prohibit retaliation and set forth procedures for reporting violations. Policy 415.00 and Procedure 415.00.01 can be found at spps.org/boardpolicies.

The District also prohibits bullying against a student, by either an individual or a group. Policy 505 and Procedure 505.00.01 define bullying and set forth procedures for reporting violations. Policy 505 and Procedure 505.00.01 can be found at spps.org/boardpolicies.

Date of Incident:____________________ Time:___________ Place:________________________________________

REPORTER OR COMPLAINANT

_____________________________________________, I am a: ( ) Student ( ) District Personnel ( ) Other (specify) ________________

Name (Print)

Contact Information: Phone: _____________________ e-mail: ______________________________________________

If District Personnel: Work Phone: ________________ Building: ____________________________________________

Were you the target of the prohibited conduct that you are reporting? ( ) Yes ( ) No

If not, please list below the name of the person who was the target of the prohibited conduct.

TARGET OF PROHIBITED CONDUCT

_____________________________________________, The Target is a: ( ) Student ( ) District Personnel ( ) Other (specify) ________________

Name (Print)

IF Target is a Student, include CIF#:_____________ and Home School:________________________________________

Contact Information (if known): Phone: _____________________ e-mail: ______________________________________

ALLEGED OFFENDER(S)

Who engaged in the prohibited conduct? Name:__________________________________________________________

They are a: ( ) Student ( ) District Personnel ( ) Other (specify) ________________

IF Alleged Offender is a Student, include CIF#:_____________ and Home School:________________________________________

Updated 8/24/2018
WITNESSES

Please list and identify any witnesses to the incident.

Name: _________________________________ ( ) Student ( ) District Personnel ( ) Other (specify) _______________

Name: _________________________________ ( ) Student ( ) District Personnel ( ) Other (specify) _______________

Name: _________________________________ ( ) Student ( ) District Personnel ( ) Other (specify) _______________

They are a:

Describe the incident in detail. (Attach additional pages if needed.)

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

I, _______________________________________, am submitting this form to report discrimination, harassment, violence, bullying or other offensive behavior which I witnessed, was the target thereof, or which I received a report or complaint thereof. The information contained in this complaint is true and accurate to the best of my knowledge, belief, and recollection.

____________________________________________
Reporter/Complainant Signature

____________________________________________
Responsible Administrator Signature

………………………………………………………………………………………………………………………….
This part is to be completed by the District/School:

Was the complaint(s) substantiated? No____ Yes__ (please list type of conduct substantiated) ______________

This completed form must be filed with the appropriate responsible administrator consistent with Procedure 415.00.01 and Procedure 505.00.01.