REPORT #	



DIGNITY FOR ALL STUDENTS ACT:



New York State's Dignity for All Students Act (The Dignity Act) seeks to provide the State's public elementary and secondary school students with a safe and supportive environment free from discrimination, intimidation, taunting, harassment, and bullying on school property, a school bus and/or at a school function.

Any PACS staff member who has been made aware of a DASA incident must report the incident to a DASA coordinator, and complete this form.

This section to be completed by the Complainant (person submitting this report)

Please fill out this form with as much information as possible and submit to the Main Office		
Date the report is being filled out:		
2 Name of person filing the report:		
Identification of person filling out this form:Check all that apply	☐ I am the alleged victim ☐ I am the parent or in parental relation to the alleged victim ☐ I am a student ☐ I am a staff member reporting an incident ☐ I witnessed a problem ☐ I was told about a problem	
4 The Best Way(s) to Reach Me: • Fill Out All That Apply	Phone number: Email: Come find me here:	
5 Identify the Alleged Victim	Student's Name: Student's Grade:	
Identify the Alleged Offender (s) List the name of student(s) or adult(s) who are being accused	1.Name	
I would best describe the incident(s) as related to the students:Check all that apply	 □ Weight (over or under) □ Height □ Physical Feature □ Clothing □ Disability □ Illness/Allergy □ Positive Academic Achievement □ Participation in an activity (music, theater, art, etc.) □ Sexual orientation □ Gender identity □ Poverty □ Religion □ Cultural Beliefs □ Race □ Other characteristics: 	
The incident(s) have occurred in the following location(s):Check all that apply	□ classroom □ hallway/locker □ cafeteria □ playground □ school bus □ gymnasium/locker room □ library □ at an off-campus school event □ internet/social media □ athletic field □ school entrance/exit □ band room □ computer lab □ off school property □ parking lot □ other	

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R E P O R T F O R M



The incident(s) has/have involved the following: • Check all that apply	 □ Physical (direct)—hitting; punching; tripping; kicking; pushing; scratching; ganging up; extortion; damaging property □ Social/Relational (direct or indirect)—excluding or threatening to exclude; spreading rumors/gossiping; ostracizing; alienating; using threatening looks/glances □ Verbal (direct)—name calling; teasing; intimidating; threatening; taunting; making offensive or discriminatory remarks (rude and or lewd) □ Cyberbullying—sending insulting messages or threats by email, text messaging, on social media, chat rooms, etc.
 Please describe the Incident Describe what was said and/or done and by whom Attach any evidence and an additional sheet for description of the incident if applicable: 	Is this the first time this has happened?
Other Witnesses: Please identify any other people who may have witnessed the incident(s) (Attach additional sheet if necessary)	1
Have you reported this situation to anyone else before filing this complaint?	☐ No ☐ Yes, I reported this to on Date
Was medical treatment needed by anyone involved in this situation	☐ I don't know ☐ No ☐ Yes, here is what I know
	1 DASA COMPLAINT FORM 2017