



BLAIRSTOWN TOWNSHIP SCHOOL DISTRICT

Post Office Box E, One Sunset Hill Road
Blairstown, New Jersey 07825
(908) 362-6111 -Fax: (908) 362-5989

Mark Saalfield, Superintendent

Bruce P. Leal, Principal

www.blairstownelem.net

Written Report #: _____ Date of Written Report: _____ School/Work Location _____

(An Interview/Information Statement for each person interviewed is attached)

Targeted Pupil: _____ (A separate Investigation Report Form is required for each targeted pupil)

Pupil(s) Accused of Exhibiting Harassment, Intimidation and Bullying Behavior:

AP1 - _____ AP2 - _____ AP3 - _____
AP4 - _____ AP5 - _____ AP6 - _____

Witness(es)

W1 - _____ W2 - _____ W3 - _____
W4 - _____ W5 - _____ W6 - _____

Investigation Findings

- 1. The following student(s) accused of exhibiting harassment, intimidation, or bullying behavior did not commit an act of HIB as defined in N.J.S.A. 18A:37-14. No further action is recommended for the following students(s):
2. The following students(s) accused of exhibiting harassment, intimidation, or bullying behavior committed an act of HIB as defined in N.J.S.A. 18A:37-14.

The "x" denotes the statement(s) that best describe the HIB behavior committed by the students(s) identified in 2. above. More than one "x" may be noted below.

- physical aggression or contact to a pupil
teasing or name-calling
insulting or demeaning comments
threatening comments, gestures or physical acts
intimidating conduct toward another pupil
spreading harmful rumors or gossip about a pupil
getting another person to harm a pupil
harassment, intimidation or bullying through electronic communications
other - please specify
destruction of property
stalking another pupil
publicly humiliating a pupil
stealing or theft
defacing/destroying property
excluding or rejecting a pupil
extorting or exploiting a pupil

3. List the actual or perceived characteristic(s) that motivated the behavior:



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4. Was this a single incident or a series of incidents? ___ single incident ___ series of incidents

5. Listed below are the students(s) identified in 2. above that have previously committed an act of HIB while attending any school in the school district.

6. The targeted student in this Report has been target in a previously confirmed act(s) of HIB while attending any school in the district. ___ Yes ___ No

Anti-Bullying Specialist

Signature

Report Date

Date Submitted to Principal*

* This Report and investigation findings must be submitted to the Principal within ten school days from the date of the written report of the alleged incident.

Consequences and Remedial Measures - To Be Completed by the Principal

The following consequences and remedial measures, in accordance with the school district's Harassment, Intimidation, and Bullying Policy and the Code of Pupil Conduct, shall be implemented for the student(s) found to have committed an act of HIB:

Table with 3 columns: Accused Student(s), Consequence(s), Remedial Measures. Rows 1, 2, 3.



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Targeted Student

Remedial Measures

1. _____
- _____
- _____
- _____

Principal Signature Date Date Submitted to Superintendent**

*** The Principal must submit this Report to the Superintendent within two school days of the completion of the investigation.*

To Be Completed By Superintendent

Further Action as Recommended By Superintendent of Schools

Signature - Superintendent of Schools

Date