

See the following forms that may be used by the District regarding bullying:

- Exhibit A: Incident Report Form (Student) — 2 pages
- Exhibit B: Investigation Report — 4 pages
- Exhibit C: School-Based Stay Away Agreement – 2 pages
- Exhibit D: Web Text for Posting Procedures for Reporting Allegations of Bullying — 1 page

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**Note:** For the transfer of a student who is the victim of bullying or who engaged in bullying, including a student who receives special education services, see FDB. For school safety transfers, see FDE. For bullying rising to the level of prohibited harassment, see FFH.

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EXHIBIT A



SAN FELIPE DEL RIO CONSOLIDATED INDEPENDENT SCHOOL DISTRICT  
STUDENT COMPLAINT FORM  
BULLYING, SEXUAL HARASSMENT, DATING VIOLENCE  
COMPLAINT FORM INSTRUCTIONS

A counselor or administrator who receives a report of bullying, sexual harassment, or dating violence will address the following issues with the student who was the target of the reported behaviors in a private meeting before assisting the student to complete the Complaint Form.

**Your Right to File a Complaint**

The policy of San Felipe Del Rio CISD is that all students and employees be free from bullying and sexual harassment, including violence in students' relationships. All charges of bullying, sexual harassment, and dating violence are to be taken very serious by students, faculty, staff, administration, and parents. The District will make every reasonable effort to handle and respond to every charge and complaint filed by students and employees in a fair, thorough, and just manner. Every reasonable effort will be made to protect the due process rights of all victims and all alleged offenders.

**Instructions:** Use this form to report bullying, sexual harassment, and dating violence so that school officials may investigate and take appropriate steps to increase your safety.

Complete the form, providing as much detailed information as possible so that the complaint may be properly investigated.

It is important that you report the facts as accurately and completely as possible and that you cooperate fully with the persons designated to investigate the complaint.

**Where to file:** Complaint forms will be available from any counselor or administrator. Once completed, the principal or designee will handle all complaints.

**Confidentiality:** To conduct this investigation in a confidential manner, the school will disclose the contents of your complaint only to those persons who have a need to know of your complaint. In signing the complaint form, you authorize the school to disclose as needed the information you have provided, and may in the future provide, regarding your complaint. Your complaint form will not be shown to the accused student.

**Retaliation prohibited:** Retaliation against a person who files a formal complaint is strictly prohibited and is grounds for disciplinary action, including but not limited to detention, suspension from school, placement at the Student Guidance and Learning Center, etc. [See the Student Code of Conduct]



SAN FELIPE DEL RIO CONSOLIDATED INDEPENDENT SCHOOL DISTRICT  
STUDENT COMPLAINT FORM  
BULLYING, SEXUAL HARASSMENT, DATING VIOLENCE

Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Grade: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ School: \_\_\_\_\_

**Please answer the following questions about the most serious incident:**

- List the name of the student(s) accused of bullying, sexual harassment, or dating violence: \_\_\_\_\_
- Relationship between you and the accused student: \_\_\_\_\_
- Describe the incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Where and when did it happen? \_\_\_\_\_
- Were there any witnesses?  yes  no If yes, who? \_\_\_\_\_
- Is this the first incident?  yes  no If no, how many times has it happened before?  
\_\_\_\_\_
- Other information, including previous incidents or threats: \_\_\_\_\_  
\_\_\_\_\_
- Student or parent declines to complete this form: \_\_\_\_\_ Initial and date.

I certify that all statements made in the complaint are true and complete. Any intentional misstatement of fact will subject me to appropriate discipline. I authorize school officials to disclose the information I provide only as necessary in pursuing the investigation.

Signature of student: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of school official receiving complaint: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of school official conducting follow-up: \_\_\_\_\_ Date: \_\_\_\_\_

STUDENT WELFARE  
FREEDOM FROM BULLYING

FFI  
(EXHIBIT)

Notes of actions taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional information from student or staff

Date	Documentation/Follow-up	Signature of Student/Staff

Describe the incident(s) as clearly as possible, including such things as: what force or physical contact, if any, was used; any verbal statements such as threats, requests, or demands; and any electronic methods, including e-mail, social media, and the like. (Attach additional pages if more space is needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXHIBIT B



SAN FELIPE DEL RIO CISD  
STUDENT INCIDENT INVESTIGATION REPORT

***(This form should be used to assist the investigator while conducting an investigation. It may also be used to document an oral report of an alleged bullying incident.)***

Name of person investigating alleged incident: \_\_\_\_\_

Name(s) of person(s) reporting alleged incident(s) *(if not the alleged victim)*:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date alleged incident(s) was (were) reported: \_\_\_\_\_

Date investigation started: \_\_\_\_\_

Name(s) of alleged victim(s): \_\_\_\_\_  
\_\_\_\_\_

Name(s) of alleged bully(ies): \_\_\_\_\_  
\_\_\_\_\_

Date(s) and time(s) of alleged incident(s):  
\_\_\_\_\_

Did the alleged incident(s) occur:

On school property?

Yes       No

At a school-sponsored or school-related activity?

Yes       No

In a vehicle operated by the District?

Yes       No

Specific location of alleged incident(s): \_\_\_\_\_

Is (Are) the alleged incident(s) recurring or first-time incident(s)? \_\_\_\_\_

Describe the alleged incident(s) as reported (*attach separate sheets if necessary*): \_\_\_\_\_

Did the alleged incident(s) occur in the presence of a witness or witnesses?

Yes  No

If yes, name(s) of witness or witnesses: \_\_\_\_\_

*[Attach any documents obtained during the course of the investigation (e.g., interview notes, witness statements, class schedules, materials to support cyber bullying, and the like.)]*

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1. Do(es) the alleged incident(s) meet the definition of discrimination, prohibited harassment, dating violence, or retaliation as defined in FFH(LOCAL)?

Yes  No

If yes, refer to proper administrator under FFH(LOCAL).

Referred to: \_\_\_\_\_ (*administrator name*) on \_\_\_\_\_ (*date*).

***(If alleged incident was referred under FFH(LOCAL), no further action is needed on this form.)***

2. Do(es) the alleged incident(s) meet the definition of bullying?

Yes  No

If yes, did the victim(s) use reasonable self-defense?  Yes  No

STUDENT WELFARE  
FREEDOM FROM BULLYING

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(EXHIBIT)

3. If the alleged incident(s) was not discrimination, prohibited harassment, dating violence, or retaliation and/or bullying, was it other improper conduct as defined by the Student Code of Conduct?

Yes    No

If yes:

Referred for disciplinary action in accordance with the Student Code of Conduct or any other appropriate corrective action to \_\_\_\_\_ (administrator name) on \_\_\_\_\_ (date).

***(If alleged incident is considered improper conduct, no further action is needed on this form.)***

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If bullying has been confirmed:

Notification provided to parents of victim(s):

Parent Name(s): \_\_\_\_\_ Date Notification Made: \_\_\_\_\_

Notification provided to parents of student(s) who engaged in bullying:

Parent Name(s): \_\_\_\_\_ Date Notification Made: \_\_\_\_\_

***(If notice of available counseling options was not provided at the time a student was interviewed, the District must still do so in accordance with local policy FFI.)***

Notification of available counseling options provided to:

Victim(s)

Name: \_\_\_\_\_

Student(s) who engaged in bullying

Name: \_\_\_\_\_

Witness(es):

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

District Action:

Referred for Discipline

Yes    No

If yes, disciplinary action recommended: \_\_\_\_\_

Eligible for transfer?

Yes    No

If yes, who? \_\_\_\_\_ (*victim*) or (*student who engaged in bullying*)

Recommendation for corrective action?

Yes    No

If yes, corrective action recommended: \_\_\_\_\_

Date investigation completed: \_\_\_\_\_

Date Investigation Report submitted to Superintendent or designee: \_\_\_\_\_

Investigator's name (*if not the principal*): \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Principal's name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



EXHIBIT C



SAN FELIPE DEL RIO CONSOLIDATED INDEPENDENT SCHOOL DISTRICT  
SCHOOL-BASED STAY AWAY AGREEMENT

The intent of this agreement is to increase safety for students who have been the target of severe or repeated bullying, sexual harassment, or dating violence. It is to be administered by the principal or the principal's designee in a conference with the offending student and his or her parent.

Name of student: \_\_\_\_\_

Date of most serious incident: \_\_\_\_\_

Description of behaviors involved in incident: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of assessment by principal or designee: \_\_\_\_\_

Date of parent notification: \_\_\_\_\_

In order to protect the rights and safety of all members of our school community, you are required to stay away from (name of targeted student) at all times during the school day and at any school-sponsored event. This means that you may not approach, talk to either in person or via any social media, sit by, or have any contact with (name of targeted student) directly or indirectly at school or on school property, school buses, and bus stops.

In addition, the following actions are effective immediately (list schedule changes), other disciplinary and or restitutionary actions.

Current Schedule	New Schedule

STUDENT WELFARE  
FREEDOM FROM DISCRIMINATION, HARASSMENT, AND RETALIATION

FFI  
(EXHIBIT)

Other disciplinary actions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Violations of this agreement and acts of retaliation directly or indirectly toward the target or the target's friends or family members will be taken seriously and will result in further disciplinary actions. Your compliance will be monitored by (name and title of school staff).

Agreement is valid from \_\_\_\_\_ (date) to \_\_\_\_\_ (date).

This agreement will be reviewed on \_\_\_\_\_ (date).

Signatures:

Student: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

- cc: Principal
- Assistant Principal
- Counselor
- Chief of Police
- Title IX Coordinator

EXHIBIT D

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**Note:** The following statement is intended to assist the District in meeting the legal requirement to post the District's reporting procedures.

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PROCEDURES FOR REPORTING ALLEGATIONS OF BULLYING  
SAN FELIPE DEL RIO CONSOLIDATED INDEPENDENT SCHOOL DISTRICT

The District prohibits bullying on school property, at school-sponsored or school-related activities, or in any vehicle operated by the District. Bullying may include verbal or written expression, expression through electronic means, or physical conduct. Bullying is not tolerated by the District, and any student or parent of a student who believes that the student or another student has experienced bullying or that a student has engaged in bullying is encouraged to immediately report the incident. Retaliation against anyone involved in the reporting process is a violation of District policy and is prohibited.

Students or parents may report an alleged incident of bullying, orally or in writing, to a teacher, school counselor, principal or other District employee. Students or parents may contact the District to obtain an incident report form that may be used to submit the report.

Please note that after submission of the complaint to the District employee, the District may assign the report to a campus administrator to follow up on the submitted report and any other important matters pertaining to the report. We encourage you to communicate with your designated campus administrator during this time.

More information about the District's bullying policy can be found at [*insert link to FFI*] or the campus administration office.