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| **DISTRICT CONTACT INFORMATION & AUTHORIZATION** |
| Date Requested:Click or tap to enter a date. | Requested Completion: Click or tap to enter a date. |
|  |  |
| School District:Click or tap here to enter text. | School: Click or tap here to enter text. |
| Contact Name:Click or tap here to enter text. | Contact Title:Click or tap here to enter text. |
| Contact Email:Click or tap here to enter text. | Contact Phone:Click or tap here to enter text. |
| Authorized By: Click or tap here to enter text. | Authorized Signature:Click or tap here to enter text. |
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| **INVOLVED PARTIES** |
| Role | Name | Title | DOB (if under 18) | Phone | Email |
| Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |
| Choose an item. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. | Click or tap here to enter text. |

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| **INCIDENT INFORMATION** |
| Date of Incident(s):Click or tap here to enter text. | Location of Incident:Click or tap here to enter text. |

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| Initial Report By:  | [ ] Complainant | [ ] Third Party | [ ] Anonymous | [ ] Safe Oregon Tip Line |

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| Agencies Notified: | [ ] Law Enforcement | [ ] Child Protective Services | [ ] TSPC | [ ] Other: Click or tap here to enter text. |

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| **TYPE OF INVESTIGATION** (Check all that apply) |
| [ ] Bias Incident | [ ] Bullying | [ ] Dating/Domestic Violence | [ ] Discrimination |
| [ ] Gender Discrimination | [ ] Harassment | [ ] Sexual Assault | [ ] Sexual Assault |
| [ ] Sexual Misconduct | [ ] Sexual Orientation | [ ] Physical Assault | [ ] Retaliation |
| [ ] Stalking | [ ] Threat(s) | [ ] Title IX  | [ ] Other:Click or tap here to enter text. |

Brief Description of Complaint: Click or tap here to enter text.