

**LYNNFIELD PUBLIC SCHOOLS  
INCIDENT REPORTING FORMS**

1. Name of Reporter/Person filing the report: \_\_\_\_\_  
(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)

2. Check whether you are the: Target of the behavior  Reporter (not the target)

3. Check whether you are: Staff Member (role) \_\_\_\_\_  
Student  Parent  Administrator  Other (specify) \_\_\_\_\_

Your contact information/telephone number: \_\_\_\_\_

4. If student, state your school: \_\_\_\_\_ Grade: \_\_\_\_\_

5. If staff member, state your school or work site: \_\_\_\_\_

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6. Information about the incident:

Name of Target (of behavior) \_\_\_\_\_

Name of Aggressor (Person who engaged in the behavior): \_\_\_\_\_

Date(s) of Incident(s): \_\_\_\_\_

Time Incident Occurred: \_\_\_\_\_

Location of Incident(s)(be specific): \_\_\_\_\_

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7. Witnesses (List people who saw incident or have information about it):

Name: \_\_\_\_\_ Student  Staff  Other: \_\_\_\_\_

Name: \_\_\_\_\_ Student  Staff  Other: \_\_\_\_\_

Name: \_\_\_\_\_ Student  Staff  Other: \_\_\_\_\_

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8. Describe the details of the incident (including names of people involved, what occurred, and what each person did and said, including specific words used.) Please use additional space on the back if necessary.

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FOR ADMINISTRATIVE USE ONLY

9. Signature of Person Filing this report: \_\_\_\_\_ Date: \_\_\_\_\_  
(Note: Reports may be filed anonymously)

10. Form given to: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Received: \_\_\_\_\_

The investigator may NOT disclose any specific disciplinary procedures instituted against any other students, including the perpetrator, under the Family Educational Rights and Privacy Act (FERPA) to third parties including the victim's parents/guardians. The district will record and maintain report of the complaint, and any possible action taken by the investigator.