

Report of Middle or High School Student-to-Student Sexual Misconduct/Violence

Alleged Offender			
Name		_ Age Sex	
Home Phone	PowerS	School ID:	
School	Grade	Special Education Yes□ No□	
Does this student have any history of reported sexual harassment offenses? Yes□ No□ How Many? If yes, list prior offenses on a separate sheet.			
Does this student have any history of sexual misconduct offenses? Yes□ No□ How Many? If yes, list prior offenses on a separate sheet.			
Complainant			
Date	Т	ime	
Name		Age Sex	
Home Phone		PowerSchool ID:	
School	Grade	Special Education Yes□ No□	
Actions Taken			
When was the complainant's report provided to the SRO?			
Date	Time		
Name of SRO			
Have you been authorized by the SRO to conduct a student discipline investigation?			
Yes □ No □	Date	Time	
Name of SRO			
If yes, following CMCSS Procedure HUM-P028, provide a <u>brief</u> summary of the findings that led you to this conclusion.*			



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Indicate which of the following was part of the resolution.		
□ ISS □ OSS		
☐ Reamendment ☐ Expulsion		
Employee Conducting Investigation		
Name Title		
School		
Signature/Date		
*Provide a narrative summary of your investigation. If needed, indicate summary is continued on a separate sheet and attach to form. Attach copies of any relevant documents, e.g. statements of persons contacted. Forward completed report and investigative materials as required by HUM-P028 to Chief of Staff. Maintain a copy of the report for your records. Click or tap here to enter text.		
Verification HUM-F111 & HUM-F112 completed and sent to parent/guardian? □Yes □No		
Summary continued on separate sheet? Yes□ (If yes, attach to this form) No□		
Ensure a completed copy of this form (founded or unfounded) is emailed to the Chief of Staff/Title IX Coordinator, Dr. Angela Huff and to assessment@cmcss.net .		

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