



Chignecto-Central Regional School Board

STUDENT RACIAL MISCONDUCT REPORT FORM

School: _____

Date: _____

1. Those involved:

Target Student(s)	Offending Student(s)

2. Manifestation of racial behavior: [appropriate descriptors]

Perception of target individual: has feelings of being bullied/harassed	
Isolation / ignoring	
Teasing	
Verbal abuse or name calling - specify:	
Expressions of prejudice / stereotype	
Threatened physical assault	
Actual physical assault	
Targeted graffiti or writing	
Other:	

3. Description of incident: _____

4. Action Taken: [meetings, letters, investigations, suspensions, etc.] _____

5. Summary of those notified and/or involved:

	✓	Details (e.g. date)
Principal		
Family of Schools Supervisor		
RCH		
Teacher(s)		
Parent(s) of target student		
Parent(s) of offending student		
Police		
Other: (specify)		

6. Signature of person completing this report.

Signature

Date

pc: RCH Division
 FOSS