

**SCHOOL DISTRICT OF PITTSVILLE
BOARD POLICY**

PERSONNEL

**GENERAL PERSONNEL POLICIES
STAFF HEALTH AND SAFETY**

Staff Protection

523.4

The District is committed to providing its staff with a safe environment in which to work. Violent behavior of any kind or threats of violence, either direct or implied, are prohibited on District property and at District-sponsored events. The District will not tolerate such conduct from its employees, former employees, contractors, or visitors.

An employee who is the victim of violence, believes he/she has been threatened with violence, or witnesses an act or threat of violence toward anyone else shall make a report in accordance with established procedures. The District will investigate all complaints filed and may investigate in other situations where no complaint was filed but was brought to the District's attention. Retaliation against a person who makes a good-faith complaint regarding violent behavior or threats of violence made to him/her is also prohibited.

An employee who exhibits violent behavior shall be subject to disciplinary action up to and including discharge and may also be referred to law enforcement.

Reviewed: May 13, 2013

WORKPLACE VIOLENCE INCIDENT REPORTING FORM

Date Reported: _____

Name of Person Making Report:

Telephone Number:

If anonymous, indicate method of notification:

Telephone call Written document Other; specify: _____

Name/Location of the affected:

Name of Alleged Threat Maker/Perpetrator: _____

Relationship to the System/ Technical College:

Employee Student Visitor Vendor Contractor

Relationship to Victim/Potential Victim (if any): _____

Name of Victim/Potential Victim: _____

ADDITIONAL INFORMATION OR DOCUMENTS MAY BE ATTACHED IF NECESSARY

When (date) and where (physical location) did alleged threat or act of violence occur?

What events occurred immediately prior to the incident?

What was the specific language of the alleged threat?

Provide specific details of the alleged threat or act of violence:

Describe the conduct and appearance of the Threat Maker/Perpetrator (physically and emotionally):

Names of Witnesses:

#1 _____
#2 _____
#3 _____

Telephone Numbers:

What happened to the Threat Maker/Perpetrator after the incident?

Names of supervisory staff involved and how they responded:

Steps that have been taken to ensure the threat will not be carried out or act of violence repeated:

Was local Law Enforcement notified? Yes No

If yes, what action was taken by Law Enforcement?

No action taken Report written Suspect escorted from property Suspect arrested

Name of local Law Enforcement Agency: _____

Suggestions for preventing a similar incident in the future:

Report Prepared by: _____

Date: _____

Job Title _____

Phone Number: _____