GANG-RELATED INCIDENT REPORTING FORM

Directions: This is a form to report alleged gang activity and similar destructive or illegal group behavior or to report reprisal or retaliation against individuals who report gang activity and similar destructive or illegal group behavior or who are victims, witnesses, bystanders, or others with reliable information about an act of gang activity and similar destructive or illegal group behavior which occurred on school property, on school buses, or at school-sponsored events.

Gang: “Criminal Gang” means a group or association of three or more persons whose members:
(1) individually or collectively engage in a pattern of criminal gang activity;
(2) have as one of their primary objectives or activities the commission of one or more underlying crimes, including acts by juveniles that would be underlying crimes if committed by adults; and
(3) have in common an overt or covert organizational or command structure.

Gang Activity: “Pattern of criminal gang activity” means the commission of, attempted commission of, conspiracy to commit, or solicitation of two or more underlying crimes or acts by a juvenile that would be an underlying crime if committed by an adult.
(a) Activities on or near school vehicles or property. – A person may not threaten an individual, or a friend or family member of an individual with use of physical force or violence to coerce, induce, or solicit the individual to participate in or prevent the individual from leaving a criminal gang: (1) in a school vehicle, as defined under §11-154 of the Transportation Article; or (2) in, or within 1,00 feet of real property owned or leased to an elementary school, secondary school, or county board of education and used for elementary or secondary education.
(b) Applicability. – Subsection (a) of this section applies whether or not: (1) school was in session at the time of the crime; or (2) the real property was being used for purposes other than school purposes at the time of the crime.

Today’s date: ___________________ / __________ / __________ School: ___________________________________
Month Day Year
School System: ______________________________

PERSON REPORTING INCIDENT

Name: ______________________________________________

Telephone: ___________________________ E-mail: _________________________________________

Place an X in the appropriate box: □ Student □ Student (Witness/Bystander) □ School Staff
□ Other_________________________________________

1. Name of student victim: ____________________________________________________ Age: _________
   (Please print)

2. Name(s) of alleged offender(s) (If known): (Please print) Age School
   Is he/she a student? (if known)

   ___________________________________________ _______    _______________________
   Yes □ No

   ___________________________________________ _______    _______________________
   Yes □ No

   ___________________________________________ _______    _______________________
   Yes □ No

3. On what date(s) did the incident happen?
   ___________________ / __________ / __________   ___________________ / __________ / __________
   Month Day Year Month Day Year

4. Please describe what occurred:
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________
5. Where did the incident occur (choose all that apply)?

- ☐ On school property
- ☐ At a school-sponsored activity or event off school property
- ☐ On a school bus
- ☐ On the way to/from school*

*Will be collected unless specifically excluded by local board policy

6. What did the alleged offender(s) say or do?

_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

(Attach a separate sheet if necessary)

7. Why did the activity occur? ___________________________________________________________

_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
(Attach a separate sheet if necessary)

8. Did a physical injury result from this incident? Place an X next to one of the following:

- ☐ No
- ☐ Yes, but it did not require medical attention
- ☐ Yes, and it required medical attention

9. If there was a physical injury, do you think there will be permanent effects?  ☐ Yes  ☐ No

10. Was the student victim absent from school as a result of the incident?  ☐ Yes  ☐ No

   If yes, how many days was the student victim absent from school as a result of the incident?  _______

11. Did a psychological injury result from this incident? Place an X next to one of the following:

- ☐ No
- ☐ Yes, but psychological services have not been sought
- ☐ Yes, and psychological services have been sought

12. Is there any additional information you would like to provide (e.g. name of gang, clique, crew, or group, if known)?

_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

(Attach a separate sheet if necessary)

Signature: __________________________ Date: ____________________