RSU #12 Code: **JICK-E3**

BULLYING AND CYBERBULLYING REMEDIATION FORM

The intent of remediating a substantiated incident of bullying is to counter the negative impact of bullying and to reduce the risk of future bullying incidents.

This remediation is in reference to the alleged incident of bullying reported on:
Name of student who was found to have bullied (do not report name of student or any personally identifying information to the Maine Department of Education):
Delineate the specific nature(s) of the incident: Cyberbullying Electronic expression Physical act or gesture Retaliation Verbal/Oral Written
Alternative discipline imposed for this student (actions taken):
Meeting with the student and the student's parent(s) or guardian(s)
Reflective activities, such as requiring the student to write a self-reflection about the their misbehavior
Mediation, but only when there is mutual conflict between peers, rather
than one-way negative behavior, and both parties voluntarily choose this option
Counseling
Anger management
Health counseling or intervention
Mental health counseling
Participation in skills building and resolution activities, such as social
emotional cognitive skills building, resolution circles and restorative

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conferencing
Community service
The student received/will receive the following discipline actions (consequences): Alternative DisciplineDetentionWeekend DetentionIn-school suspensionOut-of-school suspensionExpulsion/Recommended for expulsion
Was the student referred to law enforcement? Outcome(s): Additional details of disciplinary actions taken:
Additional details of disciplinary actions taken:
DOCUMENTATION OF ALL REMEDIATION ACTIONS MUST RESPECT CONFIDENTIALITY OF STUDENT INFORMATION AS PROVIDED BY FEDERAL AND MAINE LAW AND REGULATIONS Date:
Signature of principal or superintendent's designee completing this form
Title of superintendent's designee
If this person is not the school principal, copy to school principal on: Date
Copy received: Date: Signature of school principal

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Copy to Superintend	ent on:	
	Date	
Copy received:		Date:
	Signature of Superintendent	
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Education <i>without p</i>	personally identifying information	on
on:	initialed by:	
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