**APPENDIX F**

School Site Materials Checklist

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| **Code** | **XXXX** |

**ANALYSIS OF BULLYING LAWS AND POLICIES SCHOOL IMPLEMENTATION STUDY**

**SCHOOL SITE MATERIALS CHECKLIST**

(School Site Version)

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| On behalf of the U.S. Department of Education, EMT Associates, Inc. has selected your school to participate in a study on school bullying as one of twenty-four schools nationwide. In preparation for the site visit, we are requesting copies of each of the following materials, if available. Please the materials you attach on this checklist. You may fax the requested materials to our Field Coordinator, Ariana Bell, at 916-983-6693, or send an electronic copy via email, to abell@emt.org. Should you have any questions or concerns, feel free to contact Ariana directly by email or by our telephone number, at 916-983-6680. |

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| **School Name:** |  | | | | | | |
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| **School Address:** | |  | | | | | |
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| **District/County Name:** | | |  | | | | |
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| **Name and Telephone Number of Main Contact:** | | | | | |  | |
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| **Scheduled Date(s) of Data Collection:** | | | | |  | | |
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| **School Telephone Number:** | | | |  | | | |
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| **Principal Name:** | |  | | | | | |
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| **Name and Telephone Number of Alternate Contact:** | | | | | | |  |

1. **REQUESTED PRELIMINARY MATERIALS FOR REVIEW**

*Please indicate which of the following requested materials have been submitted for review, either by fax or email:*

* Copy(ies) of your *DISTRICT* bullying policy
* Copy(ies) of your *SCHOOL* bullying policy (if different)
* Copy(ies) of your Student Code of Conduct
* Copy (ies) of Internet Acceptable Use Policies or other guidelines regarding student technology use.
* Copy(ies) of correspondence to parents/legal guardians and school staff relevant to your school or school district bullying policy
* Copy(ies) of reporting and complaint forms for students, staff, and parents/legal guardians to notify the school of a bullying incident
* Copy(ies) of reports summarizing incident data on school bullying
* Copy(ies) of your guidelines for *LAW ENFORCEMENT* coordination
* Copy(ies) of any training materials provided to staff
* Copy (ies) of any bullying prevention, character education, or diversity appreciation program curricula and materials
* Additional documents that may be related to school bullying policies or that may be used during the resolution of a bullying incident.

(Please Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **NOTES/QUESTIONS**

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| **Code** | **XXXX** |

**ANALYSIS OF BULLYING LAWS AND POLICIES SCHOOL IMPLEMENTATION STUDY**

**SCHOOL SITE MATERIALS CHECKLIST**

(EMT Version)

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| **School Name:** | |  | | | | | |
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| **School Address:** | | |  | | | | |
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| **District/County Name:** | | | |  | | | |
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| **Name and Telephone Number of Main Contact:** | | | | | | |  |
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| **Scheduled Date(s) of Data Collection:** | | | | | |  | |
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| **School Telephone Number:** | | | | |  | | |
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| **Principal Name:** | | |  | | | | |
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| **Contact Date:** |  | | | | | | |

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(Please Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **NOTES/QUESTIONS**