

**Article 15, Sections 10 and 11 of CBA  
SERIOUS ASSAULT, BATTERY, OR MENACING REPORT**

PLEASE CHECK ONE:      ☐ ASSAULT OR BATTERY      ☐ MENACING

Date Sent:    /    /

ASSAULTED/MENACED STAFF MEMBER:

(Please print)

HOME ADDRESS:

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: (\_\_\_\_) \_\_\_\_\_

SCHOOL OF INCIDENT:

DATE OF INCIDENT: \_\_\_\_\_

POSITION OF VICTIM: \_\_\_\_\_

ALLEGED ASSAILANT:

(Student Last Name)    (First)    (MI)

DOB: \_\_\_\_\_

PUPIL I.D.#: \_\_\_\_\_

PARENT(S)/GUARDIAN(S) NAME:

LIVES WITH:

ADDRESS:

PHONE: (\_\_\_\_) \_\_\_\_\_

SCHOOL OF ENROLLMENT:

(IF DIFFERENT FROM SCHOOL OF INCIDENT)

**DEFINITION**

The District and the Cleveland Teachers Union agree that the definition of "serious assault or battery" in Article 15, Section 10 of the Collective Bargaining Agreement includes (1) any deliberate inappropriate touching by a student or object that was under control of the student, that causes serious physical, psychological, or emotional harm; or (2) reckless conduct that causes serious physical, psychological or emotional harm. The District and CTU agree that the definition of "serious menacing" in Article 15, Section 11 of the CBA includes a threat of serious physical, psychological, or emotional harm, orally or in writing, directed to the bargaining unit member or a member of the bargaining unit member's family.

1. Attach a copy of the Pupil/Employee Incident Form.
2. Did the employee report an injury?    ☐ YES    ☐ NO    Type of Injury: \_\_\_\_\_  
Did the employee report or indicate that treatment was required for injury?    ☐ YES    ☐ NO
3. Was a weapon used?    ☐ YES    ☐ NO      Use of weapon threatened?    ☐ YES    ☐ NO  
Type of weapon used or threatened: \_\_\_\_\_
4. In the opinion of the building administrator, was this a serious assault/battery, or menacing?    Yes ☐ No ☐
5. The building administrator, chapter chairperson, and assaulted/menaced staff member will meet within five work days of the filing of the Pupil/Employee Incident Form to determine whether the student can remain in his/she present placement.
6. Is student to be transferred?    Yes ☐ No ☐  
If yes, scan and forward to the following: [robyn.ballew@clevelandmetroschools.org](mailto:robyn.ballew@clevelandmetroschools.org)  
[april.daniels@clevelandmetroschools.org](mailto:april.daniels@clevelandmetroschools.org)  
If no, the Chapter Chair and receiving teacher signatures are needed for student to remain in building.

\_\_\_\_\_  
Building Administrator - Required

\_\_\_\_\_  
Assaulted Staff Member's Signature - Required

\_\_\_\_\_  
Chapter Chair - Only if student is to remain in building

\_\_\_\_\_  
Receiving Teacher (Only if student is to remain in bldg.)