# United States Department of the Interior

BUREAU OF INDIAN EDUCATION

[School Name]

[School Address]

[City, State and Zip Code]

Memorandum

Date: August 11, 2022

To: [Employee’s Name, Title]

 [School Name]

From: [Principal/Administrator’s Name, Title]

 [School Name]

Subject: **Notification of Case Closure – Employee Incident Report**

On **[insert date of report]** an Employee Incident Report was filed, in which you were named the alleged offender. The subsequent findings, conclusion and corrective/proactive actions are as follows:

ALLEGATION: **[Indicate type of alleged misconduct by staff to student, e.g., inappropriate conduct, verbal, mental, or emotional abuse, neglect, etc.; and a short summary of the specific allegation; keep consistent with that noted on the *Notification to Alleged Offender*.]**

FINDING(S): Upon completion of my investigation, I have determined the following: **[Provide a summary of the findings, to include facts without opinions or speculation.]**

CONCLUSION: **[State the results of the findings (e.g., substantiated or unsubstantiated) and if employee was removed from contact with children, indicate employee’s status (e.g.,** You may return to your Position of Record on **[insert date]**.**)]**

CORRECTIVE ACTION/PROACTIVE PLAN: **[If applicable, describe measures taken or that will be taken to prevent a similar incident from occurring in the future, such as training, verbal counseling, performance improvement, referral to Employee Assistance Program, etc., OR, if appropriate, state that disciplinary action is being considered or an administrative investigation has been initiated to determine whether corrective or disciplinary measures are warranted.]**

This memorandum serves to notify you that the Employee Incident Report dated **[insert date of report]** has been closed. **You will be advised through a separate process** **if** **disciplinary measures will be taken,** **as that is a separate action.**

Please acknowledge receipt of this memorandum in the space provided below and return it to me. Your signature does not mean that you agree with the contents of this notice, but merely reflects that you received it.

I hereby acknowledge receipt.

Employee Signature Date

Administrator’s Signature Date

cc: BIE Program Specialist (SCAN)