## **Student Incident Report Template**

Please complete all applicable sections of this form as soon as possible after the incident occurs. Be objective and factual. Submit the completed form to the designated school administrator or incident response team.

Basic Information							
Date o	of report:		Time of report:				
Name of report	ing staff:	Position / Role:		/ Role:			
Contact info	rmation:						
Student Information							
Full name of stude	ent involved:		Grade ,	/ Class:			
			Teacher / Advisor name:				
Incident Details							
Date of i	incident:	Time of incident:					
Location:							
Type of incident:	<ul> <li>□ Physical altercati</li> <li>□ Verbal conflict</li> <li>□ Academic misco</li> <li>□ Bullying or harass</li> <li>□ Vandalism</li> <li>□ Safety violation</li> <li>□ Other:</li> </ul>	nduct ment	Description of incident:  (Give an objective, detailed account of what occurred. Use additional pages if necessary.)				
Individuals Involved							
Other students involved (if any):  Name(s):							
Staff / Witnesses involved (if any):  Name(s):							
Actions Taken							
Immediate actio	on taken by staff:						
Student remove	d from situation?	□ Yes	□ No				
First aid administered?		□ Yes	□No				
Parents / Guardi	ans notified?	□ Yes	□No				
If yes, by whom and when:							

## 

Administrative Follow-Up

Name	Signature	Date
Reporting staff member:		
School administrator:		
Student (if required):		
Parent / Guardian (optional):		

## **DISCLAIMER**

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