**STUDENT INCIDENT REPORT**

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| --- | --- | --- | --- | --- |
| Reported by: |  |  | Date of report: |  |
| Title / role: |  |  | Incident no.: |  |

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| --- |
| **Student Incident Information** |
| Student name: |  | Grade level: |  |
| Date of incident: |  | Time of incident: |  |
| Location: |  |
| Specific area of location: |  |
| Additional person(s) involved: |  |
| **Witnesses:** |
|  |
| **Incident description:** |
|  |
| **Description of unacceptable / unsafe behavior or conditions *(if applicable)*:** |
|  |
| **Resulting action executed or planned:** |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Employee name: |  | Employee signature: |  | Date: |  |
|  supervisor name: |  | Supervisor signature: |  | Date: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| *–optional–*student name: |  | Student signature: |  | Date: |  |