



## Incident report/ Witness Statement / Record of Concern

Student name \_\_\_\_\_ Grade \_\_\_\_\_ I.D. # \_\_\_\_\_

Today's date \_\_\_\_\_ Date(s) incident occurred \_\_\_\_\_

Student(s) with whom there is a concern: \_\_\_\_\_

Name of adult notified/ Who did you report this to?: \_\_\_\_\_

Action taken by that adult: \_\_\_\_\_

Date of Parent notification of this concern: \_\_\_\_\_

Witnesses, if any: \_\_\_\_\_

Time(s) and Class period(s) that the incident(s) occurred: (check all that apply)

before school  after school  hallway  recess  cafeteria  Rotations: specify \_\_\_\_\_ bus (bus# \_\_\_\_\_ )

What you personally/actually saw/ heard..... Or .....What happened to you?

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Who has been affected? \_\_\_\_\_

What can be done to make things right? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(continue on back if needed)

Submitted to Office: \_\_\_\_\_

