



**Los Alamitos Unified School District
STUDENT WITNESS REPORT**

Statement of:

Student/Witness Name (print)

Grade

School

Date of Incident

Printed Name of School Administrator Taking
Statement

Please describe what occurred to the best of your knowledge. Indicate date, time, and location of the incident. Please use specific names instead of "he", "she" or "they." *(Use ink pen not pencil)*

In signing below, I agree that the above account is true and correct, and is based on things I have actually witnessed myself. I wrote this account of my own free will. I will not discuss this event with anyone.

Signature of Student/Witness: _____ Date: _____

Signature of Administrator*: _____ Date: _____

**Note: If the student is too young to write a statement, the administrator can put down what student witnessed and tells them verbally.*