

Student Name: _____

Date and time of incident: _____

Route Number: _____

Drive Name: _____

Please check the behavior below, write a detailed description of the incident, and turn incident report in to the Front Office.		
Level I	Level II	Level III
<input type="checkbox"/> Not following campus policy on food or gum <input type="checkbox"/> Not demonstrating respectful behavior toward property <input type="checkbox"/> Not following directions <input type="checkbox"/> Not demonstrating respectful behavior toward others <input type="checkbox"/> Not being honest <input type="checkbox"/> Not using appropriate language <input type="checkbox"/> Inappropriate physical interaction	<input type="checkbox"/> Throwing any object that can cause harm out of the bus <input type="checkbox"/> Bullying, threatening or harassment of any person on the bus <input type="checkbox"/> Threats towards the bus driver or monitor <input type="checkbox"/> Possession or use of tobacco or any controlled substance <input type="checkbox"/> Vandalism to the bus <input type="checkbox"/> Lighting matches, lighters or any other flammable object <input type="checkbox"/> Unauthorized use of the emergency exit <input type="checkbox"/> Possession or threats of possession of a weapon, explosive or flammables <input type="checkbox"/> Any other behavior outlined in the Code of Conduct	<input type="checkbox"/> Other offenses and behaviors which seriously jeopardize the safety of the bus driver, other students or pedestrians. <input type="checkbox"/> COVID SAFETY: Not wearing their mask <input type="checkbox"/> COVID SAFETY: Not socially distancing (e.g. sitting one student per seat except for siblings)

Detailed description of alleged incident:

Signature of Person filling out report

Date

Lined writing area with horizontal lines and occasional short horizontal segments.