

**STUDENT INCIDENT REPORT FORM**

Date: \_\_\_\_\_ Administrator filing report: \_\_\_\_\_

Student: \_\_\_\_\_ School Site: \_\_\_\_\_ Grade: \_\_\_\_\_

The following incidents apply to this report:

- |   |  |
|---|--|
| <input type="checkbox"/> academic dishonesty                        | <input type="checkbox"/> network user violation                                      |
| <input type="checkbox"/> administrative conference with student     | <input type="checkbox"/> open defiance   |
| <input type="checkbox"/> assault                                    | <input type="checkbox"/> possession or use of lethal weapons                         |
| <input type="checkbox"/> breaking of school rules repeatedly        | <input type="checkbox"/> possession, consumption, sale, or being under the influence |
| <input type="checkbox"/> bullying/intimidation (verbal or physical) | <input type="checkbox"/> profanity/obscenity   |
| <input type="checkbox"/> bus conduct                                | <input type="checkbox"/> public display of affection                                 |
| <input type="checkbox"/> conduct that threatens safety of others    | <input type="checkbox"/> pushing/shoving/kicking/punching                            |
| <input type="checkbox"/> dishonesty/lying                           | <input type="checkbox"/> sexual harassment   |
| <input type="checkbox"/> disrespect of faculty or staff             | <input type="checkbox"/> stealing  |
| <input type="checkbox"/> disruption of educational process          | <input type="checkbox"/> student conflict  |
| <input type="checkbox"/> dress code violation                       | <input type="checkbox"/> tardies, excessive  |
| <input type="checkbox"/> excessive unauthorized absences            | <input type="checkbox"/> temper tantrum  |
| <input type="checkbox"/> extortion                                  | <input type="checkbox"/> theft/possession of stolen property                         |
| <input type="checkbox"/> failure to attend assigned detention       | <input type="checkbox"/> threats   |
| <input type="checkbox"/> failure to comply with reasonable request  | <input type="checkbox"/> tobacco use   |
| <input type="checkbox"/> fighting                                   | <input type="checkbox"/> truant  |
| <input type="checkbox"/> harassment                                 | <input type="checkbox"/> unruly conduct that disrupts school                         |
| <input type="checkbox"/> horseplay                                  | <input type="checkbox"/> vandalism   |
| <input type="checkbox"/> inappropriate behavior                     | <input type="checkbox"/> vehicle violation   |
| <input type="checkbox"/> indecent exposure                          |  |
| <input type="checkbox"/> medication policy violation                |  |

If this is a bullying incident, has the student stated to the person either orally or in writing that he/she feels this behavior is inappropriate and unwelcome and he/she would like the behavior to stop?  Yes  No

Student's signed statement of incident is attached to this report.

**RESOLUTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Administrator signature

\_\_\_\_\_  
Date