

Documentation of Homicidal Threat

Student under Investigation _____ Student ID # _____
Parent /Guardian: _____ Home Phone: (____) _____ - _____
Grade: _____ School: _____ Work Phone: (____) _____ - _____
Interviewer: _____ Date: _____ Cell Phone: (____) _____ - _____

How was this threat brought to the interviewer's attention? (Check all that apply)

Add any additional information that would aid in documenting the concern

- Self report: _____
- Anonymous: _____
- Student: _____
- Counselor: _____
- Teacher: _____
- Parent: _____
- Letter/ notes, or drawings : _____
- Other: _____

When was this threat made? Date: _____ Time: _____

Student interview:

What is the threat? (Attach additional information as needed)

Target person[s]:

1. _____ 2. _____
3. _____ 4. _____

What is the students plan for carrying out the threat? _____

What is the student's perceived justification for the threat? _____

Principal: _____ **Date contacted:** _____ **Time:** _____

SRO Contacted _____ **Date contacted:** _____ **Time:** _____

Was police report filed: **Yes** ___ **No** ___ (if yes) **Date:** _____ **Time:** _____

Interviewer signature: _____ **Date:** _____

To be completed by Principal:

Parent/Guardian of student making threat:

Name: _____ Date Contacted: _____ Time: _____

Threatened Person[s]:

Name: _____ Date Contacted: _____ Time: _____

Parent/Guardian: _____ Date Contacted: _____ Time: _____

Contacted by: _____ Telephone ___ Personal Contact ___ SRO/Police

Name: _____ Date Contacted: _____ Time: _____

Parent/Guardian: _____ Date Contacted: _____ Time: _____

Contacted by: _____ telephone ___ Personal Contact ___ SRO/Police

Name: _____ Date Contacted: _____ Time: _____

Parent/Guardian: _____ Date Contacted: _____ Time: _____

Contacted by: _____ Telephone ___ Personal Contact ___ SRO/Police

Principal's signature: _____

Date: _____