

Incident Report Form

Offended Student Information

Name: _____ Grade: _____ Date: _____

Details Regarding the Incident:

Name(s) of the offending student(s): _____

Allegation Report (Specific Language Used): _____

Date/Time of the Incident(s): _____

Location of the Incident(s): _____

(Office Use Only)

Counselor/Administrator Receiving Complaint: _____

Date Received: _____

Action Taken: _____

Administrative Determination: _____

Attachments: Teacher reports, student reports, parent reports, or other information (see attachments):

CC: Principal, Tommy Ellington