



Indicate if there are witnesses who can provide more information regarding your report. If the witnesses are not school district staff or students, please provide contact information.

| Name  | Address | Telephone Number |
|-------|---------|------------------|
| _____ | _____   | _____            |
| _____ | _____   | _____            |
| _____ | _____   | _____            |
| _____ | _____   | _____            |

Have there been previous incidents? (circle one)      Yes      No

If "yes", please describe the behavior of concern, or the violence that occurred; include the approximate date(s) and the location(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Were these incidents reported to school employees? (circle one)      Yes      No

If "Yes", to whom was it reported and when?

\_\_\_\_\_

Was the report verbal or written?

\_\_\_\_\_

Proposed Solution:

Indicate your opinion on how this problem might be resolved in the school setting. Be as specific as possible.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I certify that the above information and events are accurately depicted to the best of my knowledge.

|                       |                |             |               |
|-----------------------|----------------|-------------|---------------|
| Signature of Reporter | Date Submitted | Received By | Date Received |
|-----------------------|----------------|-------------|---------------|