JICIA-E1 - Report of Dangerous Behavior by Student

MSAD #35

JICIA-E1 - Report of Dangerous Behavior by Student

1. Name of Reporter: _____ Date of Report: _____

Please note: This form must be completed by a person with first-hand knowledge of the dangerous behavior, or by a person assisting the person with first-hand knowledge of the dangerous behavior.

a. Please check the appropriate line: _____Staff member _____Student

_____ Other role (please specify):_____

2. If the person filling out this form is assisting someone who has first-hand knowledge, please provide the name of the person with first-hand knowledge:

_____

a. Please check the appropriate line: _____Staff member _____Student

_____ Other role (please specify):_____

3. Information About the Incident

a. Date and time it occurred: _____

b. Location (be specific): _____

c. Brief description of dangerous behavior by student (included who was directly subjected to the behavior, any injuries or property damage): _____

_____

_____

_____

d. Other witnesses (if any), including names and positions: _____

☐ _____

4. Contact information for follow-up (telephone and email): _____

☐ _____

PLEASE FOLD THIS REPORT, STAPLE OR TAPE IT CLOSED FOR SECURITY, AND DELIVER TO THE BUILDING PRINCIPAL. YOU WILL BE CONTACTED AFTER THE REPORT HAS BEEN ASSESSED. THANK YOU.

_____

For administrative use

Date the report was received in principal's office: _____

Policy Form Adopted: November 16, 2022

Policy Form Reviewed: December 20, 2023

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