(888) 438-0868
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# Incident Report

| School Name: | | Date of Incident: ____/_____/_____ | Time of Incident _____:_____ | Final Contract: Yes/No | IEP Student: Yes/No |
|---|---|---|---|---|---|
| Please Check: 1st Violation:_____ | 2nd Violation:____ | 3rd Violation: _____ | Other: | | |
| Name of Person Preparing Report: | | | Title of Person Preparing Report: | | |

**Check appropriate box or boxes:**

| Behavior: | Disrupts Classroom | Attendance: |
|---|---|---|
| ☐ Agitates | ☐ Defies Authority | ☐ Tardy |
| ☐ Argues | ☐ Disrespects Staff/Students | ☐ Excessive Absences |
| ☐ Fighting | ☐ Left Campus w/o Permission | ☐ Other (specify below) |
| ☐ Horseplay | ☐ Out of Supervision | |
| ☐ Name Calling | ☐ Runs Own Program | |
| ☐ Profanity | ☐ No Work/ Poor Work Habits | |
| ☐ Throwing Objects | ☐ Shows Hostility | |

**Description of Incident:**

_____

_____

_____

Recommendations: ☐ Parent Conference ☐ Suspension ☐ Final Contract ☐ Removal

**Staff Signature:** _____ Date: _____

**Parent /Guardian Signature:** _____ Date: _____