

**PINELAND LEARNING CENTER**

**INCIDENT REPORT FORM**

DATE: \_\_\_\_\_

STUDENT: \_\_\_\_\_

TIME: \_\_\_\_\_

STAFF MEMBER: \_\_\_\_\_

**NATURE OF INCIDENT:**

\_\_\_ Fighting

\_\_\_ Threats

\_\_\_ Theft

\_\_\_ Profanity/Obscenity

\_\_\_ Physical / Verbal Aggression

\_\_\_ Truancy

\_\_\_ Damage School Property

\_\_\_ Contraband

\_\_\_ Bus Incident

\_\_\_ Willful Disobedience

\_\_\_ Disrupting Classroom

\_\_\_ HIB (HIB Specialist)

**DESCRIPTION OF INCIDENT:**

Behavior(s) of Concern: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Staff Response: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Outcome: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Staff Member

**ACTION TAKEN:**

\_\_\_ Parent/Guardian Notified

\_\_\_ CST Notified

\_\_\_ Police Notified

\_\_\_ Activity Suspension

\_\_\_ After-School Detention

\_\_\_ Bus Suspension

\_\_\_ Referred to Crisis Intervention

\_\_\_ Physical Restraint

\_\_\_ Assigned to I & E

\_\_\_ Referred to Clinician

COMMENTS: \_\_\_\_\_

\_\_\_\_\_