

Report No: _____	CONFIDENTIAL SAFE SCHOOLS INCIDENT REPORTING FORM – PART I
Name of School	
1. Name of Student(s) Involved (if known)	_____ _____
2. Location of Incident (check one)	<input type="checkbox"/> At a location in the school or on school property (please specify) _____ <input type="checkbox"/> At a school-related activity (please specify) _____ <input type="checkbox"/> On a school bus (please specify route number) _____ <input type="checkbox"/> Other (please specify) _____
3. Time of Incident	Date: _____ Time: _____
4. Type of Incident (check all that apply)	<p>Activities for which suspension must be considered under section 306(1) of the Education Act</p> <input type="checkbox"/> Uttering a threat to inflict serious bodily harm on another person <input type="checkbox"/> Possessing alcohol or illegal drugs <input type="checkbox"/> Being under the influence of alcohol <input type="checkbox"/> Swearing at a teacher or at another person in a position of authority <input type="checkbox"/> Committing an act of vandalism that causes extensive damage to school property at the student's school or to property located on the premises of the student's school <input type="checkbox"/> Bullying <input type="checkbox"/> Any act considered by the principal to be injurious to the moral tone of the school including the use of homophobic comments <input type="checkbox"/> Any act considered by the principal to be injurious to the physical or mental well-being of members of the school community <input type="checkbox"/> Any act considered by the principal to be contrary to the school code of conduct <p>Activities for which expulsion must be considered under section 310(1) of the Education Act</p> <input type="checkbox"/> Possessing a weapon, including possessing a firearm <input type="checkbox"/> Using a weapon to cause or to threaten bodily harm to another person <input type="checkbox"/> Committing physical assault on another person that causes bodily harm requiring treatment by a medical practitioner <input type="checkbox"/> Committing sexual assault <input type="checkbox"/> Trafficking in weapons or in illegal drugs <input type="checkbox"/> Committing robbery <input type="checkbox"/> Giving alcohol to a minor <input type="checkbox"/> An act considered by the principal to be significantly injurious to the moral tone of the school and/or to the physical or mental well-being of others <input type="checkbox"/> A pattern of behaviour that is so inappropriate that the student's continued presence is injurious to the effective learning and/or working environment of others <input type="checkbox"/> Activities engaged in by the student on or off school property that cause the student's continued presence in the school to create an unacceptable risk to the physical or mental well-being of other person(s) in the school or Board <input type="checkbox"/> Activities engaged in by the student on or off school property that have caused extensive damage to the property of the Board or to goods that are/were on Board property <input type="checkbox"/> The student has demonstrated through a pattern of behaviour that s/he has not prospered by the instruction available to her/him and that s/he is persistently resistant to making changes in behaviour which would enable her/him to prosper <input type="checkbox"/> Any act considered by the principal to be a serious violation of the school code of conduct
5. Report Submitted By: Name: _____ Signature: _____ Date: _____ Contact Information: Location: _____ Telephone: _____	