

Franklin Lakes School District

Incident Report Form

School _____

Date: _____ Time: _____

Incident Reported by: _____

(Circle One: building faculty member victim bystander parent)

Incident Reported to: _____

Location of Incident: _____

Date and Time incident occurred _____

Is this event (circle one) **one time** or **repeating** event? If repeating, for how long?

Note all or perceived characteristics that were or may have been motivational factors in alleged incident

- Race Color Religion Ancestry National Origin
- Gender Sexual Orientation Gender Identity and Expression
- Mental or Physical or Sensory Disability Other _____

Description of Event: _____

Individuals named in event and their roles:

Name	Role

Does the Incident:

- 1) Have the effect of insulting or demeaning a student in such a way that it interferes with the orderly operation of the school? Y N
- 2) Create a hostile educational environment? Y N
- 3) Interfere with the student’s education by causing pervasive emotional or physical harm? Y N
- 4) Disrupt or interfere with the rights of other students? Y N
- 5) Have the intent of harming a student or his/her property or place the student in fear of harm to himself or his property? Y N

If YES is answered to **any** of these questions, an investigation will be opened.

If all questions are answered “NO”, no investigation will be opened.

Instead, the plan of action for dealing with this incident will be:

Person Responsible	Responsibility

