

Safe Schools Incident Reporting Form - Part 1

Part 1

CONFIDENTIAL SAFE SCHOOLS INCIDENT REPORTING FORM – PART I

Name of School

1. Name of Student(s) Involved (if known):

2. Location where injury/incident occurred

3. Time of Incident

Date

Time

4a. Type of Incident (check all that apply) Activities for which suspension must be considered under section 306(1) of the Education Act

- Uttering a threat to inflict serious bodily harm on another person
- Possessing alcohol, illegal drugs or unless the student is a medical cannabis user,*cannabis
- Being under the influence of alcohol or, unless the student is a medical cannabis user, cannabis
- Swearing at a teacher or at another person in a position of authority
- 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
- Bullying

Any other activity for which a student may be suspended under board policy (Note: Boards must specify on this form any other activities for which the principal may suspend according to board policy.)

4b. Type of Incident (check all that apply) Activities for which expulsion must be considered under section 310(1) of the Education Act

- Possessing a weapon, including possessing a firearm
- Using a weapon to cause or to threaten bodily harm to another person
- Committing physical assault on another person that causes bodily harm requiring treatment by a medical practitioner
- Committing sexual assault
- Trafficking in weapons or in illegal drugs
- Committing robbery
- Bullying (if the student has been previously suspended for engaging in bullying and the student's continuing presence in the school creates an unacceptable risk to the safety of another person)
- Any activity listed in subsection 306 (1) that is motivated by bias, prejudice, or hate
- Giving alcohol or cannabis to a minor
- Possession of explosive substance;

(Note: Boards must specify on this form any other activities for which the board may expel according to board policy.)

5. Report Submitted By

First Name

Last Name

Date and Time:

Date	<input type="text" value="yyyy/mm/dd"/>	<input type="button" value="..."/>
Time	<input type="text" value="hh:mm am/pm"/>	<input type="button" value="Now"/>

Contact Information

School Contact Number

Location:

A large, empty rectangular box with a thin black border, intended for a signature. It occupies the upper half of the page. There is a small, faint diagonal line in the bottom right corner of the box.

Signature of Staff