



SECTION:	General School Administration	APPROVAL DATE:
SUBSECTION:	School Building Administration	June 26, 1995
POLICY NAME:	Violence-Free Schools	LAST REVISED:
POLICY NUMBER:	APP.GSA.E.3	April 6, 1999

VIOLENT INCIDENT REPORT FORM

School: _____ Date: _____

Name of Student: _____

A. Description of Violent Incident:

B. Parent/Guardian Contact:

1. Date of Contact 2. Name(s) of Person(s) Contacted

C. Police Contact:

1. Date of Contact 2. Date of Police Investigation at School 3. Name(s) of Investigating Officer(s)

D. School/Board Response:

Suspension	
Other	
Expulsion	
Readmission Criteria	

5. Date of Inclusion in the OSR _____
6. Proposed Date of Removal from OSR _____
7. Principal's/Designate's Signature _____
8. Conditions for retention in OSR: _____

This information is being collected pursuant to the provisions of the Municipal Freedom of Information and Protection of Privacy Act, and under the authority of the Wellington Catholic District School Board's Violence in Schools Policy D-25 (June 3, 1991). One copy will be kept by the Superintendent of Education, and one copy will be retained by the principal in a secure and confidential location for a minimum of one year. A verbal/written notification of the collection of this information must be given to the individual concerned. Further information regarding this information collection is available from the principal of the school, or the Freedom of Information Officer.

VIOLENT INCIDENT REPORT FORM

Staff Assault

- ___ The staff member has been notified that he or she has the right to inform the police of the incident notwithstanding any investigation or action by the Board.
- ___ The staff member has been advised to obtain advice and assistance from the member's affiliate
- ___ When the alleged offender is not enrolled in the school or employed by the Board, an attempt is made to identify the alleged offender and a report is made to the police.

Signature _____