Incident Statement Form (Student)

Person Reporting: _____ Date of Incident: _____

Location of Incident: _____ Time of Incident: _____

List all involved individuals including witnesses

Full Name	
1.	4.
2.	5.
3.	6.

Describe the facts of the incident. Please include all information that may be relevant. Be thorough and objective. Please print clearly, sign and date this form.

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_____*Use another sheet if needed.*

Giving false information to the City of Baker School System or misrepresenting oneself is a violation of the RULES OF STUDENT CONDUCT.

Signature of Person Reporting: _____ Today's Date: _____

Signature of Person Receiving Form: _____ Today's Date: _____

Incident Statement Form pg. 2 (Student)