

Silver State Charter Schools
Incident Reporting Form
Violation of Safe and Respectful Learning Environment

1. Name of Reporter/Person Filing the Report: _____
Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely the basis of an anonymous report.

2. Check whether you are the: **Target of Behavior** **Reporter**

3. Check whether you are a: **Student** **Parent** **Other**
 Administrator **Staff Member**

4. Your Contact Information/Telephone Number: _____
Note: This information is only needed if you are not a student, staff member, or administrator at Silver State.

5. Name of Target (of behavior): _____

Name of Aggressor(s) Person/People who engaged in the behavior:

Date of Incident: _____

Time of Incident: _____

Location of Incident: _____

6. Witnesses (List people who saw the incident or have information about it):

Name: _____ **Student** **Other**

Name: _____ **Student** **Other**

Name: _____ **Student** **Other**

7. Describe the details of the incident (including names of people involved, what occurred, and what each person did and said, including specific words used). Please use additional space on back if necessary.