Sample



Incident Report Form Anytown Adventist School

	Date of Incident:	Time:	
School:	Name of Classro	Name of Classroom Teacher:	
Name of student(s)	involved:		
Type of incident:		_ Was there an injury? Yes No	
If there was an injur	ry, describe the injury and treatment:		
	e incident, including where the incident occur lent, and who was in charge of the activity:	red, names of witnesses, supervision at	
Were the parents co	ontacted? How? By whom? When?		
Were there any spec	cial circumstances to this incident?		
	Teacher's Signature	Date	

All serious incidents should be reported to the Local Conference Office of Education