

## FHCF.E3 - Report Of Violation Or Incident

Reported by: \_\_\_\_\_

Student: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent/guardian: \_\_\_\_\_

Briefly describe Incident or Violation: \_\_\_\_\_

Date of Incident or Violation: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Location: \_\_\_\_\_

Reported to: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

(Complete other side)

Complete as REQUIRED by School District Policy

Situational Category \_\_\_\_\_

Immediate Action \_\_\_\_\_

Investigation \_\_\_\_\_

Notification of Parents \_\_\_\_\_

Notification of Police \_\_\_\_\_

Disposition of Substance \_\_\_\_\_

Discipline/Rehabilitation \_\_\_\_\_

Additional comments or follow-up \_\_\_\_\_

New Town Public  
School District #1

**POLICY ADOPTED: 9/12/2006**  
**POLICY REAFFIRMED:**  
**POLICY AMENDED:**