

**HULL PUBLIC SCHOOLS**  
**STUDENT PREVENTION AND INTERVENTION INCIDENT REPORTING FORM**

Please complete this form to report an incident involving students. Forms may be returned to the main office at any school.

1. Name of person filing the report \_\_\_\_\_

(Note: Reports may be made anonymously, but no disciplinary action will be taken against an alleged aggressor solely on the basis of an anonymous report.)

2. Date of filing report \_\_\_\_\_

3. Check whether you are the \_\_\_\_\_ Target of the behavior  
\_\_\_\_\_ Not the target

4. Check whether you are a  
\_\_\_\_\_ Student (identify school) \_\_\_\_\_  
\_\_\_\_\_ Staff or administration member (specify role & worksite location) \_\_\_\_\_  
\_\_\_\_\_ Parent  
\_\_\_\_\_ Other (specify) \_\_\_\_\_

Your contact information/telephone number \_\_\_\_\_

**INFORMATION ABOUT THE INCIDENT**

5. Name(s) of student(s) involved

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_

6. Date of Incident \_\_\_\_\_ Time When Incident Occurred \_\_\_\_\_

7. Location of Incident (Be as specific as possible) \_\_\_\_\_

8. Witnesses (List people who saw or who might have information about the incident.

Circle the word(s) that best describes each witness.)

Name \_\_\_\_\_ Student Staff Other \_\_\_\_\_

Name \_\_\_\_\_ Student Staff Other \_\_\_\_\_

Name \_\_\_\_\_ Student Staff Other \_\_\_\_\_

9. Please use space on the back to describe the details of the incident (including names of people involved, what occurred, and what each person did and said, including specific words used).

10. Signature (optional) \_\_\_\_\_ Date \_\_\_\_\_

TURN OVER



