

**DIOCESE OF DAVENPORT
BOARD OF EDUCATION**

SERIES 500: STUDENT PERSONNEL

PROCEDURE 552.1

INCIDENT REPORT

The school should make a report that contains the following information:

- 1) Name of Involved Party (Parties), address(es) and phone number(s);
- 2) Names, addresses and phone numbers of witnesses, if there were any;
- 3) Description of the Incident in as much detail as possible including what injured was doing, the chain of events, who was involved, where accident happened, date and time of accident, etc.;
- 4) Names and phone numbers of local person(s) who conducted the investigation;
- 5) Signature and date of Program Administrator.

OR

Complete this form:

INCIDENT REPORT FORM

Location of Incident: _____ Date _____ Time _____

With Whom: _____

Filed By: _____

Description of Incident: _____

Action Taken: _____

Preventive Measures for Future: _____

Signature: _____ Title: _____

Regulation Adopted: July 16, 2001
Regulation Revised: June 5, 2002
Regulation Reviewed: May 17, 2010
Regulation Reviewed: December 2015
Regulation Revised: February 28, 2019
Regulation Promulgated: July 29, 2019
Procedure Revised: March 20, 2020