

Physical Altercation School Incident Report

Incident Details

Date of Incident

Time of Incident

Location

Individuals Involved

Student 1 Name

Student 2 Name

Student 1 Grade/Class

Student 2 Grade/Class

Other Parties Involved (if any)

Description of Incident

Please describe what happened

Actions Taken

Describe immediate actions taken and by whom

Was first aid or medical attention required?

Witnesses

List witness names and contact details (if applicable)

Reporting Staff Member

Name

Role/Position

Date of Report

Signature
