

# MILFORD PUBLIC SCHOOLS

## Incident/Issue Report for Students

**NOTE:** Keep school/office file copy and forward the original (with any back up material) to the Operations Office, Parsons Complex

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

School Telephone #: \_\_\_\_\_ Principal: \_\_\_\_\_

Date of Incident/Issue: \_\_\_\_\_ Time: \_\_\_\_\_ Student Grade Level: \_\_\_\_\_

Student Name: \_\_\_\_\_ Home Address: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Teacher on Duty: \_\_\_\_\_

Name of Witness(es): \_\_\_\_\_

Signature of Witness(es): \_\_\_\_\_

Indicate if witness is: Parent, Student, Staff, Visitor, Other: \_\_\_\_\_

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

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Tel. #: \_\_\_\_\_ Work Tel. #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Description of Incident/Issue: \_\_\_\_\_

---

---

---

---

---

Disposition: \_\_\_\_\_

---

---

---

---

---

Reporting Staff:

\_\_\_\_\_  
(Please Print Clearly) Signature Date

\_\_\_\_\_  
Principal's Signature Date