



Violent Incident Reporting Form

(To be completed for all violent incidents described in Section A below which result in a suspension)

Name of Student:		DOB:		Male	
				Female	
School Name:		Date of Incident:			

A. Description of Violent Incident (X = main reason for suspension/expulsion)

<input type="checkbox"/>	As per PPM 120
<input type="checkbox"/>	Possessing a weapon, including possessing a firearm (eg. guns, knives, replicas)
<input type="checkbox"/>	Committing physical assault on another person that causes bodily harm requiring treatment by a medical practitioner
<input type="checkbox"/>	Committing sexual assault
<input type="checkbox"/>	Committing robbery
<input type="checkbox"/>	Using a weapon to cause or to threaten bodily harm to another person
<input type="checkbox"/>	Extortion
<input type="checkbox"/>	Hate and/or bias motivated occurrences
<input type="checkbox"/>	Other Specify:

Details of Violent Incident (brief description of incident; use back of page if necessary)

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B. Police Contact

1. Date of Contact	2. Date of police investigation at school	3. Police Department Incident No.

C. School/Board Response (X)

Suspension	<input type="checkbox"/>	Expulsion	<input type="checkbox"/>	Other	<input type="checkbox"/>
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Date of inclusion in OSR: _____ Principal/Designate signature: _____

- Copies to:
- OSR
 - School File for Reporting to Ministry as per PPM 120
 - Police: - Thunder Bay Police, Chief of Police, 1200 Balmoral Street Thunder Bay, P7B 5Z5
 - Ontario Provincial Police, Detachment Commander, 2787 Hwy 11-17, RR #2, Thunder Bay, P7C 4V1
 - Area superintendent