



2135 Sills Street  
 THUNDER BAY, ON P7E 5T2  
 Telephone (807) 625-5100  
 Fax (807) 622-0961

### 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 (e.g., 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