

INCIDENT REPORT

FOR OFFICE USE ONLY

School Number _____

Incident Number _____

Date of Receipt _____

School Phone _____ District No. _____ Boro _____

DATE OF INCIDENT: _____ TIME OF INCIDENT: _____ a.m. / p.m.

LOCATION OF INCIDENT

TYPE OF INCIDENT

DESCRIPTION _____

Complaint by Victim Other/Specify _____

- A Cafeteria
- B Auditorium
- C Gym
- D Locker Room
- E Classroom
- F Hall
- G Staircase
- H Courtyard
- I Bathroom
- J Admin. Office
- K Other/specify

- A Assault
- B Harassment
- C Larceny
- D Disord. Cond.
- E Robbery
- F Sex Offense
- G Weapons Poss.
- H Gang Fight
- I Controlled Subst.
- J Bomb Threat
- K Demonstration
- L Suspicious Fire
- M Menacing
- N Homicide
- O Criminal Misch. (Vandalism)
- P Kidnap
- Q Trespass
- R Reckless Endangerment
- S Other/specify

No. Victims _____ No. Unknown Perpetrators _____

No. Known Perpetrators _____ No. Unknown Perp. (Firearms) _____

Racial Confrontation Five Percenter Activity

WEAPONS ROBBERY

Possession _____ Found _____ If Handgun: Make _____ Caliber _____ Serial No. _____

A Handgun D Sand Bag G Air Gun J Imitation Pistol M Other

B Billy Club E Sling Shot H Explosives K Dangerous Knife

C Rifle F Ammunition I Chemicals L Dangerous Instruments

Weapon Confiscated By: _____

Principal _____ Police _____

Robbery Larceny Vandalism

Transportation Cards (No.) _____

Amount (\$) _____

CONTROLLED SUBSTANCE

Use Sale Found

Confiscated by: _____

Principal _____ Police _____

VICTIM

Last Name: _____ First Name: _____

Address: _____

Boro: _____ Zip Code _____ Apt: _____

Male Female Date of Birth _____ Age _____ Phone: _____

Notification (Parent/Guardian) _____

STATUS

- Student
- Special Ed. Student
- Staff
- Teacher
- Guard
- Other

RACE

- White
- Black
- Hispanic
- Oriental
- Other

EXTENT OF INJURIES

- None
- Refused Med. Treat.
- Treated at Scene
- Hosp. Treat. _____
- Hospitalized _____
- Personal Physician _____

WITNESSES

Last Name: _____ First Name: _____

Address: _____

Boro: _____ Zip Code _____ Apt.: _____ Phone: _____

NOTE:

Statements of witness should be prepared on plain paper and attached.

PERPETRATOR

Last Name: _____ First Name: _____

Address: _____

Boro: _____ Zip Code _____ Apt.: _____

Date of Birth: _____ Age: _____ Male Female Phone: _____

STATUS

- Student
- Special Ed. Student
- Staff
- Guard
- Teacher
- Student Intruder
- Intruder
- Other

RACE

- White
- Black
- Hispanic
- Oriental
- Other

No. Weapons in Possession: _____

Notification (Parent/Guardian) _____

ARREST DISTRICT OTHER SCHOOL

By Police By Guard

P.O. Shield _____ Guard Shield _____

Complaint No. _____ Arrest No. _____

Charge: _____ Misdem. Felony

YD-1 Summons

Principal Suspension

Superintendent Suspension

Parental Conference

Other/specify _____

THIS REPORT PREPARED BY:

Name: _____ Date: _____ Title: _____

DEFINITIONS OF INCIDENTS

ASSAULT

The intentional causing of physical injury (impairment of physical condition or substantial pain), to another person, with or without a weapon or dangerous instrument. Increase in degree with seriousness of injury or weapon/instrument used. (M/F)

HARASSMENT

Intentionally striking, shoving or kicking another, or subjecting another person to physical contact, or threatening to do the same (without physical injury). ALSO, using abusive or obscene language, following a person in or about a public place, or engaging in a course of conduct which alarms or seriously annoys another person. (V/M)

LARCENY

Wrongfully taking, depriving or withholding property from another (no force involved). Victim may or may not be present. (M/F)

DISORDERLY CONDUCT

Intentionally causing public inconvenience, annoyance or alarm or recklessly creating a risk thereof by fighting (without injury) or in violent tumultuous or threatening behavior or making unreasonable noise, shouting abuse, misbehaving, disturbing an assembly or meeting of persons or creating hazardous conditions by an act which serves no legitimate purpose. (V)

ROBBERY

Forcible stealing of another's property by use of or threat of immediate use of physical force. (Victim is present and aware of theft). (F)

SEX OFFENSE

RAPE: Sexual intercourse without consent. (F)

SODOMY: Committed as in Rape with deviant sexual act being committed. (M/F)

SEXUAL ABUSE: Subjecting another to sexual contact without consent. (M/F)

PUBLIC LEWDNESS: Exposure of sexual organs to others. (M)

WEAPONS POSSESSION

Having on a person: Firearms, gravity knife, switchblade, cane sword, chuka stick, dagger, bludgeon (blunt instrument) blackjack, billy club, metal knuckles, explosives or fire bomb. (NOTE: Persons under 16 possessing any of above OR airgun, spring gun, or a dangerous knife is adjudged a juvenile delinquent). (F)

GANG FIGHT

Confrontation between organized groups of youths on school grounds.

CONTROLLED SUBSTANCE

Using or having on a person any of the prohibited drug substances (or equipment for using), including marijuana. (M/F)

BOMB THREAT

A telephoned or written message that a bomb or some similar explosive has been or will be placed within the premises of a school.

DEMONSTRATION

Two or more persons gathered for purpose of protest.

SUSPICIOUS FIRE

A fire declared suspicious by the fire department.

MENACING

Intentionally places or attempts to place another person in fear of imminent serious physical injury. (M)

HOMICIDE

Killing of a human being by another. (F)

CRIMINAL MISCHIEF

Intentional or reckless damaging of the property of another person without permission. (M/F)

KIDNAP

Unlawful and intentional restraint or abduction of another person. (M/F)

TRESPASS

Knowingly entering or remaining unlawfully in or upon a school, not having any legitimate reason nor permission from anyone authorized to grant same. (M/F)

RECKLESS ENDANGERMENT

Subjecting individuals to danger by recklessly engaging in conduct which creates substantial risk of serious physical injury.

V = Violation

F = Felony

M = Misdemeanor

NOTE: ALL SERIOUS CRIMES OR SUSPECTED CRIMES MUST BE REPORTED TO THE POLICE

DIRECTIONS: Report immediately all school-related (in school buildings, grounds, or at school sponsored affairs away from school) incidents of **ANY IMPORTANCE WHATEVER**. This includes all violent or dangerous behavior, breaches of discipline, disturbances and any activity which involves an interruption of the educational process. NOTE: ANY UNUSUAL INCIDENT OR ONE WHICH MIGHT ATTRACT PUBLICITY SHOULD BE TELEPHONED TO THE OFFICE OF SCHOOL SAFETY AT ONCE.

INSTRUCTIONS FOR COMPLETION OF INCIDENT REPORT FORM

(Complete ALL applicable sections of this report)

INCIDENT SECTION: All parts of this section must be completed.

- Fill in *Date of Incident*.
 - Fill in *Time of Incident*. Check A.M. or P.M.
 - In the space provided describe the incident.
 - If the complaint was filed by one of the victims, check *Complaint by Victim* in description section. If the complaint was not filed by one of the victims, please specify who filed the complaint next to *Other/Specify*.
 - Indicate the total number of victims next to *No. Victims*.
 - Indicate the total number of known perpetrators next to *No. Known Perpetrators*. For each known perpetrator, the perpetrator section of this form should be completed.
 - If there were unknown perpetrators, indicate the total number of unknown perpetrators without firearms next to *No. Unknown Perpetrators*.
 - If there were unknown perpetrators with firearms, indicate the total number of unknown perpetrators with firearms next to *No. Unknown Perpetrators (Firearms)*.
- NOTE: The counts of *No. Unknown Perpetrators* and *No. Unknown Perpetrators (Firearms)* should equal the total number of unknown perpetrators.
- Indicate the *Location* of the incident with a check. If the location is not one of those printed, specify on the line below other. Check only the most applicable location.
 - Indicate the *Type of Incident* with a check. If none of the printed types of incidents are applicable, check *Other*. If in doubt as to the classification of the incident use the definitions printed on the reverse of the form.
 - If *Five Percenter Activity* is involved or suspected check *Five Percenter Activity*.
 - If the incident was the result of a racial confrontation or a racial confrontation was suspected check *Racial Confrontation*.

WEAPONS SECTION: If the incident involved the confiscation of a weapon or weapons, even though the type of incident was not classified as weapons possession, complete this section. Indicate:

- The total number of weapons taken from the perpetrators next to *Possession*.
- The total number of weapons found at the location of the incident next to *Found*.
- The make of weapon, caliber of weapon and weapon serial number for all handguns. Use additional sheets for second and succeeding handguns.
- The total number of each type of weapons next to each weapon type.
- The total number of weapons confiscated by the police and the total number of weapons confiscated by the school principal.

ROBBERY SECTION: If the incident involved a robbery, larceny or vandalism, even though the incident was not classified as such, complete this section.

- Check the most appropriate category.
- If robbery or larceny were checked indicate the total number of student transportation cards taken and/or the approximate dollar amount of the theft.

CONTROLLED SUBSTANCE: If the incident involved a controlled substance or if the type of incident was classified as *Controlled Substance*, complete this section. Indicate:

- If the controlled substance was *Used, Sold or Found*.
- If the controlled substance was confiscated by the school principal or the police.

VICTIM SECTION: This section must be completed where a victim was involved. Use additional forms for the second and succeeding victims.

- Complete as many of the parts of this section as are known about each victim: *Last Name, First Name, Address, Borough of Residence, Apartment Number* if any, *Phone Number, Date of Birth, Age*, and whether the victim was *Male or Female*.
- Check the *Race* of the victim. If not one of those printed check *Other*.
- Place a check next to the appropriate status of the victim. If the victim's status is not one of those printed, specify next to *Other*.
- If the victim was injured, place a check next to the appropriate *Extent of Injuries* category. If the victim was not injured check *None*.
- If the victim was treated at a hospital and released, or hospitalized, indicate the name of the hospital in the space provided next to the category checked.
- If the victim's parent or guardian was notified circle the appropriate category and write the name of the person notified in the space provided.

WITNESS SECTION: Complete as many of the parts of this section as are known about the witness. NOTE: Statements of witness should be prepared on plain paper and attached to this form.

PERPETRATOR SECTION: This section must be completed where a known perpetrator was involved. Use additional forms for the second and succeeding known perpetrators.

- Complete as many of the parts of this section as known about each perpetrator: *Last Name, First Name, Address, Borough of Residence, Apartment Number* if any, *Phone Number, Date of Birth, Age*, and whether the perpetrator was *Male or Female*.
- Check the *Race* of the perpetrator. If not one of those printed check *Other*.
- Place a check next to the appropriate status of the perpetrator. If not one of those printed check *Other*.
- If any weapons were taken from the perpetrator's possession, indicate how many next to *No. Weapons in Possession*.
- If the perpetrator's parent or guardian was notified circle the appropriate category and write the name of the person notified in the space provided.

DISPOSITION: One disposition must be completed for each known perpetrator. Only one type of disposition (arrest, other, school) may be completed for each perpetrator.

ARREST:

- Check whether the arrest was made by *Police* or school safety officer (*Guard*).
- If a police officer was called to make the arrest, write the police officer's shield number in the space provided.
- If a school safety officer (guard) was involved write the SSO shield number in the space provided.
- In the space provided write the complaint number, if applicable.
- In the space provided write the arrest number, if applicable.
- If the charge is known, or can be determined at the time of the arrest, check the appropriate category.

OTHER: If no arrest was made, but other police action was taken, check the appropriate other action.

SCHOOL: If no police action was taken, but action was taken by the school, check the appropriate school action taken