

CONFIDENTIAL STUDENT REPORT

STUDENT NAME: _____ **GRADE:** _____

DATE OF OFFENSE: _____

TODAY'S DATE: _____

WHAT HAPPENED? _____

WHERE DID IT HAPPEN? _____

WHY? _____

SUSPECTED PEOPLE INVOLVED: _____

ANY WITNESSES? _____

THE ABOVE STATEMENT IS TRUE AND FACTUAL TO THE BEST OF MY KNOWLEDGE

SIGNATURE _____

DATE: _____

BELOW IS FOR ADMINISTRATIVE USE ONLY

ACTIONS TAKEN: _____

STAFF SIGNATURE: _____

DATE: _____