Mercer County Educational Service Center

CRITICAL INCIDENT REPORT

Student Name		Date:	Time:		
District:		Building:			
Incident:	Physical assault on teacher or student)or attempted assault)				
	Major disruption of academic proce	ess (out-of-control			
	Destruction of property				
	Leaving school grounds without permission Deliberate physciial injury to self or suicide attempt Possession of a weapon(s)				
	Possession of Contraband (drugs/a	alcohol/tobacco/paraphemalia)			
Antecedents: (Brief desciption of circumstances leading to incident)					
Incident Report	: (Be as specific as possible)				
			_		
Student Consec	juences:				
			_		
Report filed by	:	Position:			
			(OVER)		

(Office use only)					
Restraint:	physcial escort	Seclusion:	Taken to "safe" or sensory area		
	CPI used		taken to area for seclusion		
	Safety		went voluntarily or went to area when prompted		
	disengaged and let go				
	2 + person CPI hold				
	Parents called		NOTES:		
	Emergency removal				
	Taken home by:				
Copies must be sent to: Parent(s) SupervisorOther					

shared: Forms/Critical Incident Report