RESEARCH INCIDENT
REPORT BY SCHOOL ADMINISTRATOR

Name:        Date of Report:

Location of Incident:     Date/Time of Incident:

How and when were you informed of the incident? Describe the means through which you learned of the incident.

Based on your investigation of events, what happened? Provide a detailed description of the events and context in which the incident occurred. Additionally, identify all parties involved.

What corrective actions did you implement? Describe in detail the actions that you took to mitigate the consequences of the incident.
In your opinion, how could have the incident been avoided? Discuss causal factors and/or actions that you think directly influenced the occurrence of the incident.

Do you have additional information or comments not otherwise covered by the preceding questions? Provide relevant information that helps to clarify the causal factors, protocols, and/or events that facilitated the occurrence this incident.

I certify that the information provided to Polk County Public School’s Office of Assessment, Accountability, and Evaluation is truthful to the best of my knowledge.

Signature of School Administrator: ________________________________

Date: ______________