



**Incident report form**

<b>Person reporting incident:</b>  <b>Status:</b> e.g. child/ tutor	<b>Person(s) involved:</b>  <b>Status:</b>	<b>Place where incident occurred:</b> (school/ centre and room)
		<b>Nature of incident:</b> (e.g. verbal/ physical)
<b>Date of incident:</b>		<b>Time of incident:</b>
<b>Events preceding the incident:</b>		
<b>Incident:</b>		
<b>Action taken</b> (to be completed by person filling in form):		
<b>Signed:</b>		<b>Date:</b>
<b>Further action taken</b> (to be completed by Head of Service/ Head of School):		
<b>Signed:</b>		<b>Date:</b>

Please ensure this form is completed and copied to the Headteacher and returned to the Head of Service as soon as possible