

# Knob Noster R-VIII School District



## Report Form

Person Filing Report: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade/Teacher: \_\_\_\_\_

Phone Number(s): Home: \_\_\_\_\_ Other: \_\_\_\_\_

Date of incident: \_\_\_\_\_ Time of incident: \_\_\_\_\_

Nature of Issue: \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

Witnesses: \_\_\_\_\_

Action Requested: \_\_\_\_\_

---

\_\_\_\_\_  
Signature of Person Filing Report

\_\_\_\_\_  
Date

---

**To be completed by administrator**

Date Investigation Completed: \_\_\_\_\_

Conclusion: \_\_\_\_\_

---

---

---

Report made back to reporter: Date: \_\_\_\_\_ Time: \_\_\_\_\_ via \_\_\_\_\_

Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_