

Student Incident Statement Form

Office of District Operations
Rockville, Maryland
MONTGOMERY COUNTY PUBLIC SCHOOLS

DEMOGRAPHIC INFORMATION

Student/Staff Name _____ Student ID# _____

School Name _____ Grade _____

All students are entitled to procedural due process rights. Providing a statement of facts from the student perspective is a part of a student's procedural due process rights.

INCIDENT STATEMENT

☐ What happened?

☐ Where did this occur?

☐ When did this occur?

Date _____ Time: ____:____ ☐ AM/☐ PM

Date _____ Time: ____:____ ☐ AM/☐ PM

CONTINUE ON BACK

Please complete all information on the next page.

INCIDENT INFORMATION

Who was involved?

Student 1 _____ Staff 1 _____

Student 2 _____ Staff 2 _____

Student 3 _____ Staff 3 _____

Student 4 _____ Staff 4 _____

STUDENT REFLECTION

What would you do differently next time?

What will you do to restore a positive learning environment at the school?

CERTIFICATION AND SIGNATURE

☐ I certify that to the best of my knowledge and belief all of the information on this form is correct.

☐ I decline my right to provide a Student Incident Statement.

Student/Staff Signature _____ Date ____/____/____

MCPS STAFF USE ONLY

☐ Staff member wrote the student's dictated statement?

☐ Staff member name _____

☐ Student refused to provide a statement?

☐ Student provided a statement, but refused to sign?