

BUS INCIDENT REPORT

Haverhill Public Schools

The purpose of this report is to inform you of an incident involving a student on the school bus/van.

1st Notice

2nd Notice

3rd Notice

PLEASE PRINT CLEARLY

Date of Incident: _____

Student's Name: _____

School: _____ Time of Incident: _____ AM/PM

Driver/Monitor's Name: _____

Bus Number/Route Number: _____

Driver/Monitor's Report (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Violation of Safety Procedures | <input type="checkbox"/> Excessive mischief | <input type="checkbox"/> Eating/Drinking |
| <input type="checkbox"/> Destruction of Property/Littering | <input type="checkbox"/> Teasing/Bullying | <input type="checkbox"/> Rude/Discourteous/Annoying |
| <input type="checkbox"/> Fighting/Pushing/Tripping | <input type="checkbox"/> Throwing objects | <input type="checkbox"/> Unacceptable Language
<i>(including derogatory and/or racial slurs)</i> |

Description of Incident in Detail: (Do not use other students' names- initials only please)

Driver/Monitor Signature

Date

Rec'd by Transportation Office: _____
Name

Date

Forwarded to School: _____
Name

Date