Ascension Public Schools

O l - t - t t - t		REAT REPORT FORM	al an ath an adminis	tuatan Thia fanna na ar
Complete this form be completed by the	honestly and accurately. See person reporting the thre	Submit this form to the principa eat or by the school employee	al or other adminis to whom the threa	trator. This form may it is being reported.
Date of report:		, , ,		3 1
Name of person repor	ting the threat (PLEASE PRI	NT):		
(Check/Circle):				
Student	Parent/Guardian	School Emplo	oyee	Other
DESCRIPTION OF	THREAT: INCLUDE NAME O	F SCHOOL, PERSON, OR GROUP	THREATENED	
Name of student, in	dividual or group threaten	ing violence:		
,	<u> </u>			
Date and time threa	t was made://			
Method by which th	reat was made (Check/Cir	rcle):		
Social Media	Phone	Mail/Printed Material	Verbal	
Names of any witne	esses to the threat:			

I, (PRI and tru	NT NAME) ue to the best of my knowledge.	,agree that all of the	information on this form is accurate			
Signature of person reporting incident:			Date://			
Signature of person receiving form:		Position:	Date://			
ACTION(s) TAKEN BY ADMINISTRATOR (Check/Circle):						
0	Notified Law Enforcement					
0	Submitted Disciplinary History if Appropriate					
0	Notified Level Director/Superintendent					
0	Parental Notification Made					
Explain:						
Disciplinary Action Taken						
Describe:						

Last Date Updated: October 1, 2018