

School District \_\_\_\_\_

**Notification & Reporting of  
Physical Restraint and/or Seclusion**

<b>Pupil's Name</b>		<b>Parents Name</b>	
<b>Date Parents were notified of the incident</b> (and told when the written report will be available):		Parents need to be notified no later than one business day after the incident occurred	

Date written report will be available for parents		Must be available for review by the pupil's parents within 3 business days of the incident
How were parents notified?		

**Incident Written Report**

<b>Check item(s) that apply</b>							
<b>Physical Restraint</b>	<input type="checkbox"/>	Date		Time		Duration	
<b>Seclusion</b>	<input type="checkbox"/>	Date		Time		Duration	

Description of the incident


Description of the actions of the pupil

1. Before the incident	
2. During the incident	
3. After the incident	

Names and titles of the covered individuals present during the incident:	Title
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