



Fairfield-Suisun Unified School District

Individual Risk Assessment Questionnaire

Appendix C

Date Completed:

Date of incident:	Name and Title:	Supervisor and Title:
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1	Why has the offender threatened, made comments that have been perceived by others as threatening, or taken this action at this particular time? What is happening in their life that has prompted this?
2	What has been said to others (e.g., friends, colleagues, coworkers) regarding what is troubling them?
3	How does the offender view themselves in relation to everyone else?
4	Do they feel they have been wronged in some way?
5	Do they accept responsibility for their own actions?
6	How does the offender cope with disappointment, loss, or failure?
7	Do they blame others for their failures?
8	How does the offender interact with coworkers?
9	Do they feel the company is treating them fairly?
10	Do they have problems with supervisors or management?

11	Are they concerned with job practices and responsibilities?
12	Have they received unfavorable performance reviews or been reprimanded by management?
13	Are they experiencing personal problems such as divorce, death in the family, health problems, or other personal losses or issues?
14	Are they experiencing financial problems, high personal debt, or bankruptcy?
15	Is there evidence of substance abuse or mental illness/depression?
16	Have they shown an interest in violence through movies, games, books, or magazines?
17	Are they preoccupied with violent themes; interested in publicized violent events; or fascinated with and/or recently acquired weapons?
18	Has the offender identified a specific target and communicated with others their thoughts or plans for violence?
19	Are they obsessed with others or engaged in any stalking or surveillance activity?
20	Has the offender spoken of homicide or suicide?
21	Do they have a past criminal history or history of past violent behavior?
22	Does the offender have a plan for what they would do?
23	Does the plan make sense and is it reasonable and specific?
24	Does the offender have the means, knowledge, and wherewithal to carry out their plan?

Form Completed By:

Other Individuals Present:

Date Completed:

Time: