

**STUDENT RESTRAINT INCIDENT REPORT FORM***(This form is to be used for seclusions and physical restraints lasting five (5) minutes or more)*

Student: \_\_\_\_\_ School: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location: \_\_\_\_\_

Staff directly involved in restraint (include names and titles; attach supplemental statements, if any):

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Staff witnesses (include names and titles):

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Description of events immediately before the behavior occurred, including the antecedent to the student's behavior, if known:

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Alternatives attempted and/or efforts made to deescalate the situation prior to the use of restraint (if none could be used due to emergent nature of behavior, explain why):

- \_\_\_\_\_ Teaching interaction
- \_\_\_\_\_ Offered self-control strategy
- \_\_\_\_\_ Verbal de-escalation
- \_\_\_\_\_ Other(s) (please describe):

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Type/description of restraint used (i.e., type of physical hold or nature of seclusion used):

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Time restraint began: \_\_\_\_\_ Time restraint ended: \_\_\_\_\_

Chronological description of incident (include behavior, statements made, actions taken):

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Resolution of the incident:

- \_\_\_\_\_ Student calm/reintegrated into classroom/educational programming  
 \_\_\_\_\_ Student calm/additional time provided for de-escalation outside of instructional setting  
 \_\_\_\_\_ Additional support requested (medical/mental health/parent/police)  
 \_\_\_\_\_ Other (please describe):

Injuries or property loss/damage that occurred, if any:

Recommendations for adjustment of procedures based on staff review, if appropriate:

Name and title of person writing report

Signature

Checklist	Date	Comments
If an injury to staff or student has occurred, submit student accident report and/or staff incident report.		
Verbal notification to parent by building principal or designee by end of the school day that the restraint was used (indicate name/title of person who made, and method of, notification).		
Conduct internal staff review of incident of restraint.		
E-mail, mail, or fax report to parent with 5 calendar days of the use of restraint (indicate date and method of delivery).		
If requested by parents or the school, convene a meeting (which may be an IEP or Section 504 meeting) to review the incident.		

Copy to: Parent, student's confidential file and superintendent of schools

Originally adopted: August 2, 2010

Recodified: March 22, 2011 (moved policy from S-12-A to S-22)

Latest Revision: September 22, 2022