Monroe Public Schools 375 Monroe Turnpike Monroe, CT 06468 Tel. 203-452-2860 FAX 203-452-5818

INCIDENT REPORT

| Check School Below: |
|---------------------|
| ☐ Fawn Hollow Elem |
| ☐ Monroe Elem. |
| Stepney Elem |
| ☐ STEM |
| Jockey Hollow |
| ☐ Masuk High School |

| | | | Macan riigir concor |
|--|------------------------------------|---------------|---------------------|
| DATE: | | | |
| NAME. | DATE OF DIDTU | OEV. | CDADE |
| NAME: | | | |
| ADDRESS: | | PHONE: | |
| PARENT'S NAME: | | | |
| DATE OF INCIDENT: | TIME: | _PLACE: | |
| CAUSE AND APPARENT EXTENT OF | INJURY: | | |
| | | | |
| EXTENT OF CARE GIVEN IN SCHOOL | DL: | | |
| | | | |
| | | | |
| | | | |
| PERSON(S) CALLED: | | | |
| WAS CHILD TAKEN HOME: | BY WHOM? | | |
| COMMENTS: | | | |
| | | | |
| | | | |
| | | | |
| SCHOOL INSURANCE: Yes, TYPE OF COVERAGE: SCHOO |] NO LTIME, ∏ 24 HOUR, ∏ DENTAL | | |
| | REPORT FILED |) BY: | |
| | PRINCIPALS S | IGNATURE/DATE | |
| | | | |

ORIGINAL: NURSE'S FILE

CC: CENTRAL OFFICE

PRINICIPAL

BUS COMPANY, ONLY IF INCIDENT OCCURED ON BUS