



# Diocese of Jackson

## Incident Report for Violation of Safe Environment

Parish and City: \_\_\_\_\_  Student or  Staff or  Parent or  Other

Full Name: \_\_\_\_\_

*Name of the person the report is being filed against*

Complete this report for all safe environment incidents. This report is for information only. Please read each question carefully and answer all questions as completely as you can. **Please do not leave any blanks, If Not Applicable, please write "N/A".**

Name of School: \_\_\_\_\_

Name of Complainant: \_\_\_\_\_ Email: \_\_\_\_\_

*Name of the person filing the report.*

Names of Witnesses and their email and/or phone numbers:

_____	_____
_____	_____
_____	_____

When did incident occur? Date: \_\_\_\_\_ Hour: \_\_\_\_\_

Describe the Incident (If you need more space attach a separate page):

Action Taken:

Was the parent/guardian notified?

Which staff member was initially notified?

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

Report/Investigation conducted by:

\_\_\_\_\_

\_\_\_\_\_  
Signature of person making the report

\_\_\_\_\_  
Date report prepared

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

Please keep a copy of this report on file at the parish and mail this report to: Jenifer Jenkins | Safe Environment Coordinator | Office of Protection of Children & Young People | Catholic Diocese of Jackson, 215 Bishop Road | Cleveland, MS 38732