# Incident Report Form

**TYPE OF INCIDENT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LOCATION:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **TIME:** \_\_\_\_\_\_\_\_\_\_ **A.M.** \_\_\_\_\_\_\_\_\_\_ **P.M. \_\_\_\_\_\_\_\_\_**

**PERSON REPORTING INCIDENT:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INCIDENT COMMANDER:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TYPE OF RESPONSE:**

**SHELTERING Yes** 🞏 **No** 🞏

 🞏 Lockdown 🞏 Lockout 🞏 Hold-In-Place 🞏 Shelter-In-Place

**EARLY DISMISSAL Yes** 🞏 **No** 🞏

**EVACUATION Yes** 🞏 **No** 🞏

**SCHOOL CANCELLATION Yes** 🞏 **No** 🞏

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Notifications** | **Telephone #** | **Yes** | **No** | **Time** |
| **Police Department/Ambulance** |  |  |  |  |
| **Fire Department** |  |  |  |  |
| **Nassau County Red Cross** |  |  |  |  |
| **Nassau County Office of Emergency Management** |  |  |  |  |
| **PSEG** |  |  |  |  |
| **BOCES District Superintendent** |  |  |  |  |
| **Superintendent of Schools** |  |  |  |  |
| **School Building Principal (IC)** |  |  |  |  |
| **Asst. Building Principal (Alt. IC)** |  |  |  |  |
| **State Education Department** |  |  |  |  |
| **Radio Station** |  |  |  |  |
| **Newspaper** |  |  |  |  |
| **Hospital** |  |  |  |  |