

SUICIDE CONCERN REPORT FORM

REPORTING INFORMATION:

Staff member submitting report: _____

Principal: _____ School: _____

Address: _____ Phone: _____

Reported to Principal or Counselor

Date of Report: _____ Time: _____

Reported to Parent or Guardian

Date of Report: _____ Time: _____

Parent /Guardian Name _____

Address _____ Phone: _____

Agency Reported to (if applicable): _____

Date of Report: _____ Time: _____

PERSONAL DATA:

Student:

_____ DOB/Age: _____

Address: _____

Phone: _____ Academic Year: _____

INCIDENT INFORMATION:

Incident Date: _____ Incident Time: _____

Incident Location: _____

To the best of your knowledge has this student made prior threats or actions? _____

What was the nature of the Incident? Complete either A or B below:

A.

- Verbalizes thoughts of self-harm without a specific plan or
- Verbalizes thoughts of self-harm with a specific plan

Briefly describe the events leading up to and surrounding the threat:

Was the threat verbal or written? To whom was it made?

Did the person have a plan?

How was the incident learned of? Did the person seek help? Did someone discover him/her?

B.

- Acts on self-harm thoughts with intention to hurt self, but act is either not completed or does not result in injury or poisoning
- Acts on self-harm thoughts with intention to hurt self, and act results in injury or poisoning

Can you briefly describe what took place?

What was the primary means that the person used to hurt him/herself?

Were there any secondary means involved (e.g. alcohol, drugs, medication)? If medication was involved, where was it obtained?

How was the incident learned of? Did the person seek help? Did someone discover him/her?

How was the incident handled? By whom? Please list names of anyone involved:
