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| https://www.eatonresa.org/downloads/administration/new_eresa_logo.png | Human Resources**Threat Assessment –****Data Summary** |
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| INSTRUCTIONS: *Use this form to summarize key information about the person of concern and any relevant data.* |
| **SECTION I – Person of Concern Information** |
| Name | Date of Birth | Grade | Classroom |
| Address | City | Zip Code |
| Emergency Contact | Relationship to Student | Phone Number |
| IEP/504 Plan | [ ]  YES | [ ]  NO | [ ]  UNKNOWN |
| History of violent behavior in school? | [ ]  YES | [ ]  NO | [ ]  UNKNOWN |
| History of violent behavior away from school? | [ ]  YES | [ ]  NO | [ ]  UNKNOWN |
| History of discipline referrals? | [ ]  YES | [ ]  NO | [ ]  UNKNOWN |
| Other Information |
| **SECTION II – Incident Information** |
| Date Incident Occurred: | Date Reported: |
| Reported By:  | Incident Location: |
| What was reported (quote as possible; use quotation marks to identfy direct quotes) |
| **SECTION III – Victim/Recipient/Witness Information** |
| Has an intended target/victim(s) been identified? | [ ]  YES | [ ]  NO |  |
| Primary target/victim of incident:[ ]  Student [ ]  Teacher [ ]  Related Service Staff [ ]  Other Staff [ ]  Administrator [ ]  Parent [ ]  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name(s), Category (Student, Teacher, etc.) of Target(s). |
| Name(s), Category (Student, Teacher, etc.) of Victim(s). |
| **SECTION IV – Administrator Certification** |
| Administrator Name (Printed) | Administrator Signature | Date |