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| https://www.eatonresa.org/downloads/administration/new_eresa_logo.png | Human Resources  **Threat Assessment –**  **Witness Interview** | | | |
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| INSTRUCTIONS:  *Use these questions as a guide to interview individuals with direct or indirect knowledge of a person of concern making the threat or exhibiting concerning behavior. Other questions should be asked, if appropriate and relevant. This form should NOT be completed by the witness. Use quotation marks to indicate the witness’s exact words when applicable.* | | | | |
| **SECTION I – Witness Information (Completed by Interviewer)** | | | | |
| Name | | | Date Of Interview | |
| Position/Title/Role | | | Phone Number | |
| **SECTION II – Questions (Completed by Interviewer)** | | | | |
| What happened today when you were [place of incident]? | | | | |
| What exactly did the person of concern say or do? | | | | |
| What did you think they meant when they said or did that? | | | | |
| How do you feel about what they said or did? (Probe to see if the witness was frightened or intimidated.) Are you concerned that they might actually do it? | | | | |
| What was the reason they said or did that? (Probe to find out if there is a prior conflict or history to this incident.) | | | | |
| What do you feel would be an appropriate response? Why? | | | | |
| Other relevant information (Witnesses, context, observations of the student’s demeanor/affect, etc.) | | | | |
| **SECTION III – Interviewer Certification** | | | | |
| Interviewer Name (Printed) | | Interviewer Signature | | Date |