BUFFALO TEACHERS FEDERATION
271 Porter Avenue, Buffalo, New York 14201

INCIDENT REPORT

_____

TEACHER NAME ***DATE OF INCIDENT*** ***SCHOOL/GRADE/SP. ED.***

(Check appropriate line)

_____Teacher assault (***Call BTF first. Also see pages 34, 35 and 36 of the BTF Master Contract regarding Protection of Teachers and Assault and Menace.)***

_____Vandalism/Theft of teacher's property

_____Other (any serious incident involving a teacher, student, administrator, parent, intruder, or any Board personnel)

Details (include names, dates & times, etc.). Please use a separate sheet of paper if necessary.

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ACTION TAKEN (at school)

_____ BTF called_____
(Person calling) (Date) (BTF staff member contacted)
____ Affidavit filed by teacher *(Call BTF before submitting, attach copy, see special note below)**
_____ Superintendent's suspension (formal)
_____ School suspension (informal)
_____ Police notified
_____ Charges filed (family court)
_____ Charges filed (criminal court)
_____ Property claim filed – attach copy
_____ Other (explain)_____

***SPECIAL NOTE:** An affidavit is nothing more than your signed statement attesting to the facts made before a notary or a commissioner of deeds. If a notary or a commissioner of deeds isn't readily available to you, call the BTF for assistance. You are also very strongly urged to contact the BTF first before you submit any written statements. Your statement should include: "I was assaulted by_____and request his/her formal suspension, I do not want_____returned to my class" (If so desired).*