

Onondaga Central School District Workplace Violence Incident Report

1. Date of Incident
2. Time of day/shift when the incident occurred
3. Workplace Location where incident occurred
4. Provide a detailed description of the incident including:
a. Events leading up to the incident and how the incident ended;
b. Name and job title of involved employee(s);
c. Name or other identifier of other individuals involved;
d. Nature and extent of injuries arising from the incident and;
e. Name of witnesses
f. If law enforcement was contacted, the agency and report/case#
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