2643 W. College Ave.
State College, PA 16801
(814) 861-7980
Fax: (814) 861-8030
www.clccharter.org

INCIDENT REPORT

PUBLIC AND SCHOOL COMMUNICATIONS AND COMPLAINT RESOLUTION

INCIDENT DATE: _____

Incident reported by: _____ Date: _____

Description of Incident:

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Incident Presented to: ☐ Board Member ☐ CEO ☐ Staff Member ☐ Committee

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Incident Meeting

Date: _____

Those Present: _____ _____

_____ _____

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Result of Meeting:

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By signing below you indicate attendance and receipt of documentation.

Complainant Signature: _____ Date: _____