



# NSTU Member Incident Reporting Form

Please note: This document is also on the NSTU website, [www.nstu.ca](http://www.nstu.ca)

Please PRINT and enter ALL information requested

## Instructions

1. This Member Incident Reporting Form should be used to document behaviour or conduct the teacher feels is not conducive to a safe, orderly, positive and effective learning environment.

2. This form should be completed and distributed **within 24 hours** of the incident or sooner if possible.

3. Upon completing the Incident Reporting Form distribute it **immediately** as follows:

**One copy** retained by you;

**One copy** fax to NSTU Central Office at 902-477-3517 or send by mail to 3106 Joseph Howe Dr., Halifax, NS B3L 4L7

**You must not provide copies of this form to anyone other than as noted above.**

1. Name of Member \_\_\_\_\_  
(a) Home Phone Number: \_\_\_\_\_  
(b) email address: \_\_\_\_\_

2. Name of School/Campus \_\_\_\_\_  
Name of School Board \_\_\_\_\_

3. Were you injured?  
Yes  No

If yes, did you require medical attention?  
Yes  No

4. Were you threatened?  
Yes  No

If yes, did you require treatment?  
Yes  No

5. Was the incident reported to police?  
Yes  No

6. Was property damaged?  
Yes  No

7. Date of incident (mm/dd/yr): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Time of Day \_\_\_\_\_

8. Where the incident occurred: \_\_\_\_\_

If you wish to speak to an Executive Staff Officer about the incident(s) as noted under Sections 4, 5 and 6 please contact the NSTU Central Office at 1-800-565-6788 and speak to a staff officer in the Member Services Department.

Describe Incident – if you require more space please use back of form

9. Please describe in detail what occurred and/or what was said to you. If you sustained an injury describe in detail your injury and any medical attention you required. If property was damaged describe in detail the nature of the property damage.

10. Signature of Member \_\_\_\_\_  
Date \_\_\_\_\_

*This document will be used for research purposes. By signing this document the teacher consents to the Nova Scotia Teachers Union collecting this information.*