

**USD 308
Hutchinson Public Schools
Documentation of Restraint**

Student:

Building:

KIDS #:

Restraint – Reporting Checklist

Date of Usage (Document on the same day):

Time Implemented:

Time Ended:

School Employees implementing physical restraint:

Witnesses of restraint:

Event/Behavior that precipitated use of restraint (antecedent):

Briefly describe event:

Sent to Parent on:

By what means:

Principal:

Teacher:

Date:

Date:

School Email:

Phone Contact:

We strongly encourage you to use the contact information listed above to schedule a meeting to discuss the incident and future proactive responses.

Parental Feedback/Comments: