ENTIAT SCHOOL DISTRICT

2650 Entiat Way - Entiat, Washington 98822 - Telephone (509) 784-1800 - Fax (509) 784-2986 www.entiatschools.org

It is the mission of the Entiat School District to provide all students with the necessary knowledge, skills, and attitudes to be productive and responsible citizens.

Isolation, Seclusion, and/or Physical Restraint Documentation Form

Student name:	Birthdate: Grade:
Check any applicable: IEP Section 504 Plan	Behavior Intervention Plan/Personal Safety Plan
School/Site where incident/event took place:	
Location within building/on grounds where incident/event took place:	
Type of incident/event (check all applicable): Isolat	tion Seclusion Physical Restraint
Describe:	
Date of incident/event: Time of day:	Duration:
Description of the incident/event, interventions, reason	n(s), event(s)/circumstances leading up to the action(s): (attached
documentation if necessary):	
Injuries to student, staff, peers, others:None Yes (describe &/or include/attach school nurse documentation):	
Day, time, and method parent(s)/guardian(s) notified:	ification of more than one parent/guardian may be required.
Disciplinary action (if applicable):	
Other comments/documentation (e.g., required by fed documentation, damage to property):	eral or state law, SRO/law enforcement report, SSD
Printed Name of Staff Member Completing Form	Position/Job Title
Signature	 Date Completed

Keep original document in student's file, mail copy home

The Entiat School District does not discriminate on the basis of sex, race, creed, religion, color, national origin, age, honorably discharged veteran or military status, sexual orientation including gender expression or identity, the presence of any sensory, mental, or physical disability, or the use of a trained dog guide or service animal by a person with a disability in its program and activities and provides equal access to the Boy Scouts and other designated youth groups.