

Report of Suspension of Students with Disabilities
for reasons other than violence, vandalism, weapons or substance abuse
for the Electronic Violence and Vandalism Reporting System (EVVRS)¹

Use this form to report the suspension of students from their IEP placement for reasons other than violence, vandalism, weapons and substance abuse (VV-SA). To report an incident of violence, vandalism or substance abuse (e.g., fight, threat, damage to property), use the Incident Report Form. In accordance with federal requirements, **report all in-school suspensions** (that is, any removal from the classroom lasting at least one-half day) of students with disabilities **whether or not the student receives IEP services** during the in-school suspension.²

School _____

Incident Information

Incident Number: _____ (System-generated upon data entry)

Location of Incident: cafeteria, classroom, corridor, other inside school, school entrance, building exterior, other outside, bus, district office, off-site school-sponsored program, other school grounds.

Date of Incident: _____ **Time of Incident:** _____ **Bias:** Y / N

Police Notification: ___ none ___ notified and complaint filed ___ notified and no complaint filed

Gang Related: Y / N **Contact Name:** _____ **Phone:** _____

Incident Type (check one): **Minor physical altercation (e.g., scuffle):** ___ **Other:** ___

Brief Description of the Reason for the Suspension: _____

Offender Information Page

Student ID#: _____

Removal (from class): **Must be 'Yes'**

Disciplinary Action Taken (check):

	Number of Days		Number of Days
___ In-School Suspension	___	___ Unilateral Removal	___
___ Out-of-School Suspension	___	___ Removal by ALJ for dangerousness	___

Program Provided Upon Disciplinary Action: ___ None ___ Assignment(s) ___ Academic Instruction (only) ___ Support Services (only) ___ Educational Program (Instruction & Support)

Location of Program/Services:

___ In-school setting ___ *In-district alternative educational program ___ Other in-district setting
 ___ Home (includes home instruction) ___ *Out-of-district alternative educational program
 ___ Other out-of-district setting

* District Board of Education or Department of Education approved only

¹ Available at <http://homeroom.state.nj.us> – EVVRS.

² An in-school suspension is defined by IDEA reporting requirements as an instance in which a child is temporarily removed from his/her regular classroom(s) for disciplinary purposes but remains under the direct supervision of school personnel. Direct supervision means school personnel are physically in the same location as the student under their supervision.

Student Offender Information

State (NJSmart) ID _____ First Name: _____ Last Name: _____

Gender: Male Female

Grade of student in school: _____

Ethnicity: Hispanic Non-Hispanic

Race: American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

Student Disability Category (check one category only):

Autism Deaf-Blindness Emotional Disturbance Hearing Impairments

Mental Retardation Multiple Disabilities Orthopedic Impairments

Other Health Impaired Specific Learning Disabilities Speech-Language Impairments

Traumatic Brain Injury Visual Impairments

Limited English Proficient (LEP): Yes No **Section 504:** Yes No

Student Victim Information (if applicable)

Victim Type: General education student Student with disabilities Student from another school Non-student School personnel Identifiable group

Student ID#: _____

First Name: _____ **Last Name:** _____ **Gender:** Male Female

Ethnicity: Hispanic Non-Hispanic

Race: American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White

Grade of student in school: _____

If eligible for Special Education, check Disability Category (Omit if not classified)

Student Disability Category (check one category only):

Autism Deaf-Blindness Emotional Disturbance Hearing Impairments

Mental Retardation Multiple Disabilities Orthopedic Impairments

Other Health Impaired Specific Learning Disabilities Speech-Language Impairments

Traumatic Brain Injury Visual Impairments

Limited English Proficient (LEP): Yes No **Section 504:** Yes No