



Communication of Risk and Harm

This is a record documenting notification given to a parent/guardian of a suicide threat/ideation, suicide attempt, cutting/self-harm, bullying, cyber-bullying, harassment, hazing, or retaliation incident involving their student. This form must be maintained securely, confidentially, and separately from the student's educational records by school administration consistent with [Utah Code 53G-9-604](#). DO NOT USE THIS FORM TO NOTIFY A PARENT/GUARDIAN OF THE SUICIDE THREAT or BULLYING INCIDENT.

Report Date: _____ Student: _____ Grade: _____

Parent: _____ Phone: _____

Reported by: _____ Title: _____

School: _____ Parent Contacted: Yes No

Notes:

CONCERNS

- Abusive Conduct
- Cutting/Self-Harm
- Retaliation
- Suicide Threat/Ideation
- Bullying/Cyber-bullying
- Hazing
- Suicide Attempt

ACTION TAKEN

- 911 called for ambulance/hospitalization
- Administered the Columbia Protocol
- DCFS contacted 1.855.323.3237
- Police contacted
- Safety Plan
- Student taken home by parent
- Student taken to ER by parent
- Provided prevention materials and information
(If student threatened suicide or was involved in bullying)
Distributed by: Digital copy Physical copy ([English](#)) ([Spanish](#))
- Other

SUMMARIZE SITUATION

Requesting additional support from Social Worker: Yes No

Date each item when completed.
 1 copy to Building Administrator: _____
 1 copy to Coordinator of Student Services: _____
 1 copy for own records (optional): _____

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