

GAAF ESI DOCUMENTATION FORM

EMERGENCY SAFETY INTERVENTION DOCUMENTATION

Date: \_\_\_\_\_

Dear: \_\_\_\_\_

The purpose of this letter is to inform you that on \_\_\_\_\_, at \_\_\_\_\_ (a.m./p.m.)  
(date) (time)  
the need for the use of an Emergency Safety Intervention was required for  
\_\_\_\_\_.

(name of student)  
***K.A.R. 91-42-1(c) defines Emergency Safety Interventions (ESI) as “the use of seclusion or physical restraint when a student presents an immediate danger to self or others. Violent action that is destructive of property may necessitate the use of an ESI.” Whenever an ESI is used, the parent(s)/guardian(s) must be informed within (2) school days.***

Type of Emergency Safety Intervention Used: Seclusion \_\_\_\_\_ Restraint \_\_\_\_\_

Duration of Seclusion/Restraint: \_\_\_\_\_ (minutes) Location: \_\_\_\_\_

Name of Staff Member: \_\_\_\_\_ Witnesses: \_\_\_\_\_

Description of Incident:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please contact the building principal if you have any questions regarding this use of ESI.

\_\_\_\_\_  
(Signature of person completing report) (Date)

\*Parent(s)/guardian(s) notified of this incident on \_\_\_\_\_ by \_\_\_\_\_  
(Date) (Name of staff member)

\*Original provided to Building Principal  
\*Copy provided to (Parents/Guardians, Administrative Office)