**Student Risk of Suicide or Self-Harm Documentation**

[**Suicide Risk Assessment Steps and Procedure**](https://docushare.everett.k12.wa.us/docushare/dsweb/Get/Document-127824/Suicide%20Risk%20Assessment%20Steps%20%26%20Procedures.pdf)

*\*Asterisk denotes drop-down list*

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|   **Student Information** |
| **Student:**  | **Student ID:**  | **Date:**  |
| **School:** \*  | **Grade:** \*  |

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| **Staff Member Completing Form:**  |

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| **Identification of Risk** |
| **Reason for Concern:**  |

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| **Risk Screening** |
| **Screening Conducted by:**  |
| **Date of Screening:**  |
| **Type of Screening Conducted:** \*  |
| **Results of Screening:**  |
| **Recommendation:**  |

[**asQ Suicide Risk Screen Guide and Tool**](https://docushare.everett.k12.wa.us/docushare/dsweb/Get/Document-125103/asQ%20Screening%20TOOL%20-%20EPS%20FIS%20-%20fillable.pdf)

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| **Notification of Parent/Guardian** |
| **Parent/Guardian:**  | **Phone Number:**  |
| **Parent/Guardian:**  | **Phone Number:**  |
| **Staff who notified parent/guardian:**  | **Date Notified:**  |
| **Name of parent/guardian notified:**  |
| **Parent/Guardian Response:** **\***  |
| **Steps Taken if Unable to Notify Parent:**  |

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| **Other Notifications (Dependent Upon Severity)** |
|  | **Name:** | **Date:** |
| [ ]  Building Administrator |   |   |
| [ ]  School Counselor |   |   |
| [ ]  Other (i.e. School Psych/Case Manager/Crisis Line):  |   |   |
| [ ]  911 |   |   |

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| **Actions Taken/Resources Given** |
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