

CORPORAL PUNISHMENT REPORT FOR OCR

Mandated by Benton County Board of Education

This form must be completed each time corporal punishment is used. The school office will collect and submit these forms to central office at the end of the year.

Ask the student: Is there any reason you cannot be paddled?
Have you been paddled today by someone else?

Student Name: _____

Date: _____

Time: _____

Please circle in each category:

Sex: Male Female

Race: American Indian Asian Black Hispanic White

Special Education Student: Yes No

504 Student: Yes No

Number of Swats: 1 2 3

Reason for Punishment:

Corporal Punishment given by: _____
Signature

Name of witness: _____
Witness Signature