

Illinois Elementary School Association 1015 Maple Hill Rd., Bloomington, IL 61705 Phone: (309) 829-0114 Fax: (309) 829-0625 E-mail: general@iesa.org

## **CONCUSSIONS** Special Report from Athletic Official to the School Principal and the IESA Office

The fields in this form will accept a cursor and can be filled out prior to printing.

This form is to be used to report the removal of a student-athlete from a contest for exhibiting the signs, symptoms, or behaviors consistent with a concussion. All instances involving the removal of a participant for a possible concussion should be reported on this form. Prompt reporting of these instances by officials is expected.

## This form is to be filled out and signed by the official and sent to the IESA office within 48 hours of the incident.

Regarding School:		
Regarding Activity:	Girls	⊖ Boys
Contest Date:		
Home School:	Home School City:	
Visiting School:	Visiting School City:	
Specific matter being reported:		
Explanation or comment:	(Use other side if necessary)	
Official's Signature		Date