**MDHS/DYS Training School**
**Oakley Campus**
**Witness Statement – XV.2.D**

**Date of Incident: _____ Time of Incident: _____**

***In the space below, describe in your own words what you saw and heard. Please include the date and time of the incident, where the incident occurred, who was present, and what happened. Do not include opinions or guesses about what happened.***

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

*Signature*

_____

*Printed Name*

_____

*Date of Statement*