

Incident Report

Copies to:

_____ Person Reporting

_____ Human Resources

This form should be completed immediately after the incident and taken to the Human Resources office. As with any incident it is up to the person reporting the incident to contact the police and file a report – the college cannot file a report for an individual.

Person Reporting Incident: _____ Incident Date/Time: _____

Exact location on campus where this incident took place (include room number if applicable):

Describe what happened in detail. If theft occurred, name all items with descriptions and any details that would identify the items. Use back of form if necessary. _____

If theft occurred, was the area YES NO Was there indication of YES NO
or vehicle secured or locked? forced entry?

Was there any property damage? YES NO Please list damage: _____

Was anyone injured? YES NO Please list all injured and describe injury: _____

What insurance coverage exists? _____ If known, give company name and policy number. _____

Whom did you contact about the incident? _____ What is their title or role on campus? _____

Was an emergency service called? YES NO What services were notified or contacted? _____

I chose to file a police report. Report number: _____ I chose not to file a police report.

Signature of Person Reporting Incident

Date

Human Resources Signature

Date

Documentation of follow-up: _____