



### INCIDENT REPORT FORM

Instructions: College employees/students are to complete this form as a written record of any reported incident occurring on campus. An *incident* is defined as any occurrence related to personal health or safety (e.g., accident, injury, or illness), any occurrence related to criminal activity (e.g., theft, assault), or any occurrence related to property damage (e.g., fire, flood, explosion). Return completed forms to the Dean of Instruction and Student Services.

1. Date of Incident: \_\_\_\_\_ 2. Time of Incident:  AM  
 PM

3. Location in Which Incident Occurred:

4. Type of Incident: n

Accident n Illness Q

Injury

D Criminal Activity Q Personal

Property Damage D College

Property Damage

5. Outside Authority(ies)

Notified:

Law Enforcement

D Fire Department

D Ambulance/Life Squad

D Utility Company

D State Agency

D No Authority Notified

Other (List)

6. List the Names, Addresses, and Telephone Numbers of All Persons Involved:

7. List the Names, Addresses, and Telephone Numbers of Any Witnesses:

8. Describe the Incident. Use Back of Page if Necessary:

Person Reporting: