

INCIDENT REPORT

Campus Recreation

Persons Involved:		Dat	e of Incident:	Tir	ne:	_AM PM
Name:		UID#:		Phone:		
Local Address:						
Status: Student	☐ Faculty/Staff	☐ Daily Guest	☐ Other:			
Email:						
Name:		UID#:		Phone:		
Local Address:						
Status: Student						
Email:						
Program: ☐ Open Recreation ☐ KNR Class #	on Sport Club Instructor:	•				
Where did the incident occ	ur? (Document specifi	c area (room, court	or field #on line	next to facility)	
☐ Challenge Course	🗆 Student	gory Street				
☐ Rappel Tower	☐ McCormick Hall ☐ Hort			ton Complex _		
☐ Redbird Adventure Ctr						
What was the incident? ☐ Abusive Language ☐ Fight ☐ Scheduling Conflict ☐ Theft		☐ Memb ☐ Studer	n ership Issue nt Team Incident	☐ Near Miss ☐ Suspicious	s Behavior	
What took place, give speci	fic details:					
What action steps did you t	ake to address the in	cident, and who w	as involved in the	e response:		

Witness Information: Name: ______ Signature: ______ Phone: _____ _____ City: _____ State: ____ Zip: _____ Local Address: ☐ Faculty/Staff ☐ Daily Guest ☐ Other: _____ Status: Student Name: ______ Signature: _____ Phone: _____ Local Address: _____ City: _____ State: ____ Zip: _____ Status: ☐ Student ☐ Faculty/Staff ☐ Daily Guest ☐ Other: _____ **Action Taken:** Police Called? Yes No Officer's Name/Badge #: ______ Yes No Name (you talked to on phone): Facilities Services Called? Professional Staff Called? Yes No Name (you talked to on phone): **Additional Notes:** Preparer's Name Printed: ______ Date: _____ Date: _____ **Post Incident Action Taken:** (To be completed by professional staff or graduate assistant) Professional Staff Review Signature: Associate Director Initials: _____ Additional Copies if Applicable: Copy - ISU Police Copy - SCCR For office use: Database entry date: _____ Entered by (initials): _____ Database record #: _____