Incident Report

Rhode Island College Student Activities
Student Union 408
(401) 456-8034
http://www.ric.edu/student_activities/

Please complete this form if there is an altercation or a major incident at an event and bring a copy to Student Union 408.

Person involved (Please Print):

Name_________________________ Sex ___ Age______

Address_________________________ Phone________

Status: Member_____ Guest_____ Other(specify)_________________

Day/Date of Incident_______________ Exact Time:__________

Exact Location:____________________________________________

*Describe incident with detail (other persons, situation, equipment, etc…)
   ______________________________________________________________________________________________
   ______________________________________________________________________________________________

Witness(es) to incident (PLEASE PRINT):

Name_________________________ Phone:__________________

Current Address:_________________ EMPL ID_____________

Name_________________________ Phone:__________________

Current Address:_________________ EMPL ID_____________

Name_________________________ Phone:__________________

Current Address:_________________ EMPL ID_____________

If incident occurred during an activity was the activity supervised? Yes_______No_______

Staff person on duty________________________________________

*Action taken:
   ______________________________________________________________________________________________
   ______________________________________________________________________________________________

Report Documented By:____________________ Date:______________

Position:___________________________________________________

*Use other side if necessary

Rhode Island College Student Activities 2009-2010