



# UC San Diego RECREATION

## Departmental Incident Report

### Incident Information:

Person(s) Involved:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Student \_\_\_\_\_ Fac/Staff \_\_\_\_\_ Other \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Month Day Year

Person(s) Involved:

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_

Student \_\_\_\_\_ Fac/Staff \_\_\_\_\_ Other \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Month Day Year

### Background Information:

Date of Incident \_\_\_\_\_

Time of Incident \_\_\_\_\_

Location of Incident \_\_\_\_\_

Staff Person Responding \_\_\_\_\_

### Description of Incident:

To the best of your ability, please describe how the situation occurred, including any factors (emotional, physical, environmental or other) that may be related to the incident. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action Taken by Staff: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Person Submitting this Report::

Area of Employment (i.e.: Aquatics, IM's, Sport Clubs, Outback, Rec Classes, Operations) \_\_\_\_\_

Notes: (Please add any additional information or request not noted above) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Distribution: \_\_\_\_\_ Recreation \_\_\_\_\_ SFO \_\_\_\_\_ Other \_\_\_\_\_ Follow Up