

# Student Group Incident/Emergency Report Form

*If the event has occurred on Campus contact the Campus Security Office at your respective campus. 780-497-5555*

*Once you have reported it to Campus Security, fill out this form and contact the Student Groups Manager by email or phone within 48 hours. (workmanm@macewan.ca or 780-497-4362).*

*Remember that failure to report an incident/emergency could result in someone else being put at risk in the future.*

*You could also put the status of your club at risk by not reporting*

*This form should be used for each occasion of:*

- *Emergencies*

*Aggressive behavior*

- *Verbal abuse*

- *Destruction of equipment or property (or threats of)*

*Physical assault (or threats of)*

## Student Groups/Emergency Report Form

*Must be completed within 24 hours.*

**[Required] Date / Time**

**Subjects Name**

**Telephone**

**[Required] Email Address**

*Valid input:*

*- name@myschool.edu*

**Address**

**[Required] Location of Incident**

**[Required] Who did you report the incident to?**

*Who on campus did you report the incident to previous to this form?*

*i.e. Security / Facilities / SAM Centre*

**[Required] Description of Incident**

*Describe in detail the who, what, where, when and why .*

*Valid input:*

*- must be between 75 and 150 characters.*

**[Required] Describe Outcome**

*What action was taken, who responded to the incident/emergency (campus security, police, club president).  
In point form outline steps taken to resolve incident and any recommendations you have.*

*Valid input:*

*- must be between 75 and 200 characters.*

**Name of Witness 1**

**[Required] Phone Number of Witness**

*Valid input:*

*- must be 10-15 digits long and may include only numbers, hyphens, and spaces.*

**[Required] Name of Witness 2**

**[Required] Name of person completing form**

**[Required] Phone No of Witness2**

**[Required] Phone No of Person Completing this form**

**[Required] Name of Person Completing this Form**