

RECOGNIZED STUDENT ORGANIZATIONS* of THE PENNSYLVANIA STATE UNIVERSITY

Incident Report Form

Name of Student Organization: _____

President's Name: _____ Phone no: _____ Email: _____

Advisor's name: _____ Phone no: _____ Email: _____

Location code: _____

Type of Activity: meeting social fundraiser trip other: _____

Location of incident: _____

Name of injured person: _____

Address: _____ City: _____ State: _____

Phone no: _____ Zip code: _____

Email: _____

Name of damaged property owner: _____

Address: _____ City: _____ State: _____

Phone no: _____ Zip code: _____

Identify or describe damaged property: _____

Description of Incident: _____

Signature of Club President or Advisor: _____

Date: _____

*** Includes UP Club Sports and UP Team Sports**