

XX Univ. Study Abroad Incident Report Form
Submitted to International Programs Coordinator

Today's Date:

Reporters Role (circle one): Faculty Staff Student Parent Other _____

Contact information of Reporter (email & phone): _____

Program Name (If known): _____

Date of Incident:

Name(s) of those involved in Incident (If possible provide full name):

*Student ID's of those involved in the incident, if known: _____

Local Time of Incident: _____

Location of Incident: _____

Others Involved in Incident: _____

Please check the appropriate box(es) to indicate the nature of the incident:

- Alcohol/Drugs
- Injury/Illness
- Theft
- Arrest of Student
- Assault of Student
- Other, please specify _____

Please describe the Incident, be as specific as possible, including all details (Attach additional pages if necessary):

Have any emergency contacts been contacted for any of the parties involved? Yes No Unknown

What actions or steps have been taken so far? Have in country local authorities or U.S. Embassy staff been contacted?

What assistance, if any, is needed from XX Institution?

*Student ID combined with name could pose security risk depending on submission format. Check with campus CIO for instructions.