



Central Alabama Community College INCIDENT REPORT

1. Date of Incident**2. Time of Incident****3. Location of Incident (Building, Campus, Site, etc.)****4. Name(s) of Individual(s) involved in Incident****5. Reporting Employee(s)****6. Incident Type (Fill in blanks in all areas that apply.)**

INCIDENT	BRIEF DESCRIPTION OF INCIDENT
<i>Accident</i>	
<i>Illness or Injury</i>	
<i>Student Code of Conduct Alleged Violation</i>	
<i>Theft / Lost Property</i>	
<i>Safety Issue / Concern</i>	
<i>Classroom Issue</i>	
<i>Other</i>	

7. Campus Police Office:

☐ Alexander City (256-307-6849)	☐ Prattville (334-312-0589)
☐ Childersburg (256-307-8003)	☐ Talladega (256-307-0432)
Officer Notified:	Date:

8. If Vehicle involved, list following information: (if not completed by person reporting incident, PD Officer should complete).

Tag Number:	VIN#:
Make/Model:	Color:

9. Witnesses to Incident (NAME AND CONTACT INFORMATION)

10. Incident Description: (BE SPECIFIC AND FACTUAL. DESCRIBE THE INCIDENT. SCAN AND DESCRIBE THE ENVIRONMENT. LIST THE STEPS THAT WERE TAKEN.)

11. Date & Time this Report was Submitted

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12. Signature of Reporting Employee

Email / Submit signed copy to Campus Police immediately following incident.