

Sample
INCIDENT REPORT FORM

Ukrainian Orthodox Church (Insert name of your parish and address)
Incident Report Form
SAMPLE

Name of Person Submitting Form

Date of Incident _____ Time of Incident _____ am
pm

Location of Incident

This incident involved the following (please check as many as are applicable):

- Youth Group Members Spiritual Father
- Youth Workers
- Chaperones

Please list names of those involved and indicate with a "f" or "m" in parentheses after the name as to their sex:

Where did the incident occur?

Was anyone injured? Yes No If yes, who and in what ways:

Name _____ Injury

Name _____ Injury

Were they taken to the hospital? Yes No If yes, to which one and by what means of transportation?

Please give a description of the incident:

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UOC Incident Report Form

Please describe how the situation was handled:

Please list any others who witnessed the incident:

Was this a repeat offense or incident for those involved? Yes No

Did the authorities have to be contacted? Yes No
If yes, who was contacted and who arrived?

I attest that the information on this form is correct and true to the best of my knowledge.

Signature _____ Date Submitted

This form is confidential and will only be used by the parish Spiritual Father and/or Youth Minister if the occasion arises.