Appendix A

Winthrop University

Workplace Incident Report

Date of Incident:	Time of Incident:	am/pm	
Location of Incident:			
TYPE OF INCIDENT (check all that	apply)		
 □ Physical Assault □ Verbal Threat □ Property Damage □ Telephonic threat (i.e., e-mail, □ Intimidation □ Severe Behavioral Change □ Other 	•		
Describe what happened (be specific; attach additional sheets if necessary):			

Please provide the following information	about the alleged assailant if known:
Name:	Race:
Height:	Hair:
Weight:	Clothes:
Other:	
Was this a \square Student, \square Employee, \square	Visitor, or □ Other
Witness List:	
Was Campus Police called? □ Y	YES □ NO
If yes, what was the name of the reporting	g officer?
Do you know if the alleged assailant has	had any reported or non-reported questionable
behavior in the past?	
Your Name:	
Telephone #:	
Name of Victim:	
Department:	
Employee Signature:	Date:
Supervisor's Signature:	Date:

RETURN FORM TO CAMPUS POLICE