

# The University of Alabama - General Incident Report

**Directions:** This form is to be completed by a faculty member or staff member. Include only factual information. Once complete, the form should be saved to your computer and sent via email to [kmcdonald@fa.ua.edu](mailto:kmcdonald@fa.ua.edu). If you have questions, please call Kaci McDonald in Risk Management at (205) 348-0395.

Name of reporting person: \_\_\_\_\_ Office phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_ Department: \_\_\_\_\_ Email address: \_\_\_\_\_

Date of incident: \_\_\_/\_\_\_/\_\_\_\_ Estimated time of incident: \_\_\_:\_\_\_ Check one: \_\_\_AM or \_\_\_PM

Type of incident (check all that apply): \_\_\_Automobile accident \_\_\_Personal injury \_\_\_Property damage  
\_\_\_Property theft or disappearance \_\_\_Other, explain: \_\_\_\_\_

Location of incident (street intersection, building name, room number, etc.): \_\_\_\_\_

Brief description of the incident: \_\_\_\_\_

Describe the damage to UA property, nature of the personal injury, items stolen or disappeared, etc.: \_\_\_\_\_

Was UAPD or another responding agency called? (Check one) \_\_\_Yes or \_\_\_No If yes, please provide the name of the responding agency: \_\_\_\_\_

Is a report from the agency expected? (Check one) \_\_\_Yes \_\_\_No or \_\_\_Unknown

Please provide the report number if available: \_\_\_\_\_

**It is very important that you record as much information as possible below for everyone who was involved or witnessed the incident.**

**Person 1** Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Home phone: \_\_\_\_\_ CWID number: \_\_\_\_\_ Driver's license number: \_\_\_\_\_  
Home address: \_\_\_\_\_

This person (check all that apply): \_\_\_was driving a UA vehicle \_\_\_was driving a non-UA vehicle  
\_\_\_was injured \_\_\_had property damage \_\_\_witnessed the incident \_\_\_was early on the scene  
\_\_\_had property stolen or disappear \_\_\_other (describe here): \_\_\_\_\_

**Person 2** Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Home phone: \_\_\_\_\_ CWID number: \_\_\_\_\_ Driver's license number: \_\_\_\_\_  
Home address: \_\_\_\_\_

This person (check all that apply): \_\_\_was driving a UA vehicle \_\_\_was driving a non-UA vehicle  
\_\_\_was injured \_\_\_had property damage \_\_\_witnessed the incident \_\_\_was early on the scene  
\_\_\_had property stolen or disappear \_\_\_other (describe here): \_\_\_\_\_

**Person 3** Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Home phone: \_\_\_\_\_ CWID number: \_\_\_\_\_ Driver's license number: \_\_\_\_\_  
Home address: \_\_\_\_\_

This person (check all that apply): \_\_\_was driving a UA vehicle \_\_\_was driving a non-UA vehicle  
\_\_\_was injured \_\_\_had property damage \_\_\_witnessed the incident \_\_\_was early on the scene  
\_\_\_had property stolen or disappear \_\_\_other (describe here): \_\_\_\_\_

If more than three people were involved or witnessed the incident, record their information and provide it to Kaci McDonald in Risk Management. (See contact information above.)