** West Virginia University**

**Interfraternity Council**

**INCIDENT REPORT**

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| **Date:** | **Name of Person Completing Form:** |
| **Date of Incident:** | **Location of Incident:** |
| **Name of Fraternity Involved:** | **Other:** |
| **List All Persons Involved (if applicable):** | |
| **Briefly, But Completely, Describe The Incident:** | |
| **Result:** | |