**OPIRG Brock Incident Report**

\*When completing this report, please keep the person reporting the issue anonymous, unless they want their name listed.\*

**Date of Incident(s):**

**Name of event that incident(s) occurred at:**

**Number of event participants impacted:**

**Person(s) involved in the incident(s) who caused harm:**

**OPIRG Person present at incident(s) (if any):**

**Incident Description:**

**Key Problems:**

**Potential Steps forward:**

**Any necessary contact information to transition/ continue an accountability process:**

(Only to be completed if the person(s) who were impacted by the issue(s) feels comfortable and wants to continue with an accountability process or would like any updates on the conclusion of a process)