



UMW STUDY ABROAD INCIDENT REPORT FORM

In the event of a critical incident abroad, please complete this form and return it to CIE. This form can be used when a student has been negatively impacted by the actions of another individual, or when the student's actions have a negative impact on another individual. Action may need to be taken by the faculty while abroad, but that does not preclude formal action upon return to campus.

Today's date: _____

Date and time incident occurred: _____

Place incident occurred: _____

Staff Person Completing this Report: _____

Name(s) of student(s) and/or staff involved: _____

Check the appropriate box(es) to indicate the nature of the incident:

Underage Alcohol Possession

Alcohol Intoxication

Drugs

Theft

Assault of Student

Injury/Illness

Arrest of Student

Other, please specify: _____

Describe the incident. Be as specific as possible, including all details. Use additional sheets if necessary.

Name(s), phone number(s), and email(s) of witness(es): _____

ACTIONS TAKEN

What actions were taken at the time of the incident?

Verbal warning issued (Attach a record, including date, people involved, and subjects covered)

Written warning (Attach Copy)

Housing arrangements altered

Student counseled to stay away from another member of the group (no contact order)

Student restricted from participating in a group activity

Student returned home voluntarily

Student was expelled from the program (and sent home) by faculty

Student was expelled from the program (and sent home) by host university

Was student connected to an advocate or similar resource? YES NO

If yes, please specify:

MEDICAL EMERGENCY ONLY

Was first aid or medical assistance administered? YES NO

If yes, by whom?

Describe aid administered:

Was student taken to the hospital? YES NO

FACULTY/STAFF SIGNATURE

Report filed by: _____

Program: _____

Country: _____

Signature: _____