

Adams County Center
401 North Main Street
Adams, WI 53910
Phone: 608.339.3379 Fax: 608.339.9625

Marshfield Campus
2600 West Fifth Street
Marshfield, WI 54449
Phone: 715.387.2538 Fax: 715.389.2864

Stevens Point Campus
933 Michigan Avenue
Stevens Point, WI 54481
Phone: 715.344.3063 Fax: 715.342.3134

Wisconsin Rapids Campus
500 32nd Street North
Wisconsin Rapids, WI 54494
Phone: 715.422.5300 Fax: 715.422.5561

Toll-free: 888.575.MSTC Web: mstc.edu

INCIDENT INFORMATION:

Today's Date:

Your Name:

Phone: _____ / _____ / _____

Email:

Are You: MSTC Employee Student Other (please explain):

Please understand that the information you submit will be distributed to others as necessary and/or appropriate.

INCIDENT:

The incident you are reporting is an event related to the Student Code of Conduct or the Emergency Reference Guide. It is either a Conduct Incident or a Campus Incident. **Please check the appropriate box below.**

If you are reporting an injury, you must fill out the First Report of Injury Form.

CONDUCT INCIDENT

The incident reported involves one or more of the following:

- ♦ Non compliance with MSTC policies – including, but not limited to: www.mstc.edu/students/policies.htm
- ♦ Non compliance with civil and criminal laws
- ♦ Dishonesty, including knowingly furnishing false information to MSTC, and the alteration or use of MSTC documents or instruments of identification with intent to defraud.
- ♦ Conduct which disrupts the normal operations of MSTC and/or classroom
- ♦ Conduct which is disorderly, lewd or indecent including physical abuse, verbal abuse, threats, intimidation, harassment, sexual offenses, coercion and/or any conduct which threatens or endangers any person
- ♦ Theft of, or damage to, MSTC or personal property
- ♦ Failure to comply with a reasonable request or directive of an MSTC staff member
- ♦ Use, possession or distribution of illegal drugs or alcohol
- ♦ Possession of firearms, explosives, dangerous articles and/or incendiary devices

Email completed form to studentincidentreports@mstc.edu or give a copy to Director of Student Support or Campus Dean.

CAMPUS INCIDENT

The incident reported involves one or more of the following:

- ♦ 911 or Other Emergency
- ♦ Haz Mat Issue
- ♦ Theft
- ♦ Fire/Explosion
- ♦ MSTC Property Damage
- ♦ Personal Property Damage

Email completed form to campusincident@mstc.edu or give a copy to MSTC Business Office.

INCIDENT CONTINUED:

Date of Incident:

Time of Incident:

Campus/Center Location: Adams County Center Marshfield Stevens Point Wisconsin Rapids

Please identify all who were involved, including witnesses – include first and last names:

DETAILED STATEMENT EVENTS:

PRIOR ACTION YOU HAVE TAKEN:

Signature: _____ Date: _____

OFFICE USE ONLY:

Date Received:

Initials: