KKFI Incident Report
Submit completed report to KKFI Board President, Vice President, Secretary, or Treasurer.
Attach additional pages as needed.
Please submit report within 90 days of incident occurring.

REPORTED BY: ___________________________ DATE OF REPORT: ___________________________
(Please print)

TITLE / ROLE: ___________________________ INCIDENT NO.: ___________________________
RECEIVING EXEC OFFICER SIGNATURE: ___________________________ (for office use only)
DATE RECEIVED: ___________________________

KKFI Code of Conduct, Item C: Respect for Others. Volunteers, staff, listeners, guests, and
 callers must be treated with respect and courtesy. Bullying** will not be tolerated.
**Until the time that the terms ‘respect’, ‘courtesy’ and ‘bullying’ have approved definitions, determination of whether the
incident qualifies as a Code of Conduct violation rests with the Executive Committee of the KKFI Board of Directors.

INCIDENT INFORMATION
INCIDENT TYPE: (circle) Injury Disrespect Bullying Other
DATE OF INCIDENT: ___________________________
LOCATION: ___________________________

INCIDENT DESCRIPTION
(Continue on back)

NAME / CONTACT OF PARTIES INVOLVED (does not have to include the person who is filing this report)
1. ___________________________
2. ___________________________
3. ___________________________

NAME / CONTACT OF WITNESSES (should include the person filing the report if not an Involved Party)
1. ___________________________
2. ___________________________
3. ___________________________

POLICE REPORT FILED? ___________________________

FOLLOW-UP ACTION (for office use only)

KKFI Executive Board
Officer NAME & TITLE: ___________________________ DATE: ________________
Thank you for filing a report. The Executive Committee will inform you of subsequent actions within 30 days of Executive Officer signature and date.