OLIVE FREE LIBRARY 4033 Rt 28-A West Shokan, NY 12494

INCIDENT REPORT

Phone: 845-657-2482 Fax: 845-657-2664 helpdesk@olivefreelibrary.org

Instructions: Please complete this form after an incident on Library premises. An incident can be a severe altercation with or among patrons, events that occurred that are dangerous to the staff or public, or where the police or emergency services were summoned (report required in such instances). Submit completed report to the Library Director. To be completed by staff within 12 hours of incident. Name of reporting staff: Date/Time of incident: Patron and/or staff involved (provide names if known): Location of incident: Describe the incident to the best of your best recollection (Additional paper attached? Yes # of Pages): Were Police or Emergency Services called? (Circle one) Yes No If **No** please specify circumstances in the description of incident. If Police/Emergency services called, please provide names/badge numbers of responding officers: Badge #: Badge #: Please provide information on how incident was handled by police/emergency officials: **Person Filling out Form** Print Name: ____ Signature:

Print Name(s): Signature:

What follow-up by Administration is recommended?

Signature of Police/Emergency Personnel):