**Incident Report – Harassment**

**CONFIDENTIAL**

Event/Activity:

Date & Time:

Name or description of offender(s):

Description of problematic behavior:

Additional Notes:

Reported By:

(You may choose to report anonymously and not include your name, though it may limit the actions that can be taken.)

TO BE FILLED OUT BY RECEIVING OFFICER:

Officer Receiving Report: Autocrat / Seneschal / Deputy Seneschal

Discussed incident with reporting party? Yes / No

Options offered to reporting party: (should include calling police if violations of criminal or civil law)

Actions taken in response:

Written report sent to Kingdom Seneschal’s office on: \_\_\_/\_\_\_/\_\_\_\_\_