

University of New Hampshire  
*Interfraternity Council*

**INCIDENT REPORT**

**Incident Date:**

**Time Incident Occurred:**

**Location:**

**Complainant Individual/Chapter:**

**Date Report Written:**

**Respondent IFC Chapter:**

**Chapter President Contact Information:**

**Phone:**

**Email:**

**Chapter Address:**

**Interfraternity Council Policy Violation?**      Yes \_\_\_\_      No \_\_\_\_

**Student Code/SRRR Violation?**      Yes \_\_\_\_      No \_\_\_\_

**Arbitration? (If yes, skip violations.)**      Yes \_\_\_\_      No \_\_\_\_

**Violation(s):**

**Witnesses:**

**Complainant Account:**