APPENDIX D:
Houston Cole Library, Jacksonville State University
LIBRARY INCIDENT REPORT FORM

Date: _________________  Time: _________________
Person Reporting Incident: _________________________________
Duty Librarian _________________________________

Reported Incident Type:
☐ Theft  ☐ Illness/Injury  ☐ Assault  ☐ Vandalism
☐ Maintenance  ☐ Open door  ☐ Alarm Problem  ☐ Mutilation
☐ Problem Patron
☐ Other  ______________________________________

Brief Description of Incident:

Follow-up Actions: