



# EMERITUS INSTITUTE

## INUVÜWÖVUPESÄVÖT ÄÖF ÖÖ REPORT FORM

Please submit this form to Elsa Amadin, Administrative Assistant, Saddleback College Emeritus Institute - eamadin@saddleback.edu

### Location

Date \_\_\_\_\_ Time \_\_\_\_\_

Reported by \_\_\_\_\_ Department \_\_\_\_\_

Location of the incident \_\_\_\_\_

Names of persons involved \_\_\_\_\_

Tasks being performed when incident occurred

### Property, Equipment Damage

Damaged items \_\_\_\_\_

Type of damage \_\_\_\_\_

Approximate replacement value of damaged item \_\_\_\_\_

How did damage occur?

**Details (Optional additional details):**

**Sketch:**

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