

# NBIAA INCIDENT REPORT FORM



**Purpose:** Please complete the following for any disciplinary offences that occurred during a NBIAA sanctioned event. This form must be signed by your school Principal within 72 hours of the incident to be considered.

**10.9** - Upon the NBIAA receiving this form, the NBIAA, Conference President(s) and / or Hockey Coordinator(s) will refer to By-Law Article 11. The \$200 fee will be invoiced to the school if the verdict is not in their favor and the fee will be kept at the conference level. The Incident Report Form fee will not be required when submitted by a school not involved in the improper conduct.

1. Contact information of the person and school submitting the complaint:  
Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
School Name: \_\_\_\_\_

2. Name of person, team and/or school believed to have committed the offence:  
Name: \_\_\_\_\_ Number: \_\_\_\_\_  
Sport team: \_\_\_\_\_ School: \_\_\_\_\_

3. What criteria does this incident report fall under:  
Reviewing the conduct of game officials, players or coaches during altercations, specifically when the use of force is concerned.  
Reviewing a game situation that has, or may have, resulted in a serious injury to any player whether a penalty was assessed or not.  
Other:

4. Describe in detail the act(s) regarding the offence (attach additional information if necessary):

5. Did an injury occur due to this incident?  
If yes, please describe in detail: Yes No

6. When did the event occur? Provide specific dates and time if known.

7. Where did the event occur (school, city, address)?

8. Who was directly involved in the event? List all persons and provide their contact information if available.

9. What other persons witnessed the event or otherwise have relevant information? List all persons and provide their contact information if available.

10. What specific law, rule, agreement or policy was breached, if known?

11. Do you believe that criminal activity has occurred? Yes  No

a) If yes, what is the nature of the crime believed to have been committed?

12. Have the police been contacted? Yes  No

a) If yes, provide full details of any contact with the police, including dates of contact, identity of police officers involved, identity of person(s) who contacted the police, the nature of the contact with the police, and a description of what the police were told.

11. Did the event involve a potential discrimination, harassment or abuse? Yes  No

a) If yes, have steps been taken under the Department of Education Policy 701? Please provide full details of any such steps.

12. Have any other steps been taken to address or resolve the complaint? Yes  No

a) If yes, please describe:

13. Please provide any additional relevant information.

**Athletic Director's Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_  
**Principal's Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_