

# Office of Student Involvement and Leadership

## Interfraternity Council Incident Report Form

This form should be submitted to the Greek Advisor in the Office of Student Involvement & Leadership in MH 159 or fax to 504-280-6633 within 48 hours after the incident. For more information, call 504-280-6349 or email sil@uno.edu

**Chapter In Violation:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Date and Estimated Time of Violation:**  
\_\_\_\_\_  
\_\_\_\_\_

**Location of Violation:** \_\_\_\_\_

**Potential New Member(s) Involved In Violation:**  
\_\_\_\_\_  
\_\_\_\_\_

**Brief Description of Violation (Use Separate Sheet of Paper if Necessary):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Chapter/Person Submitting Complaint:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

<p><b><i>SIL Office Use Only:</i></b> Received on: _____  Greek Advisor Signature: _____  Date: _____</p>
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