

**Kansas State University Office of Greek Affairs
Incident and Complainant Report**

Who was involved? _____

Where did the incident occur? _____

When did the incident occur? _____

What happened? _____

Additional Information: _____

I agree that all information provided in this report is a factual and accurate account of the events that I have encountered.

Complainant Name: _____

Complainant Signature: _____

Please check here if you choose to remain anonymous: _____ Date: _____