Date (mm-dd-yyyy):

## Damage Report (for Students)

To: Manager of Student Support Division, College of Arts and Sciences

Report of damage is made as follows.

Person entering information	(Circle, sports team, etc.)  Department:	Faculty	Strea	am Department	Year	Student ID card number	
	Name	Mobile phone					
	Address						
	Ī						
Date of damage	From (mm-dd-y	ууу)			:	(time)	
	to				:		uring this erval)
Location where damage occurred							
Details of damage							
Items lost/stolen	Money or goods lost/stolen (provide details)			Identifying features			No.
Notification to police	□ Will not	tify → Planned date:	Month	Day	□ Will r	ot notify pol	ice
* For entry by Office		_					