

# CDAА Incident Form

Purpose: To document an event that occurred that potentially deviates from CDAА policies, guidelines or codes of conduct. Once completed, the document should be given to the sport director who will then forward to the CDAА executive director and ethics committee members within 48 hours of receiving it.

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

Time: \_\_\_\_\_

Sport: \_\_\_\_\_

Field / Gym: \_\_\_\_\_

City: \_\_\_\_\_

Coaches Involved:

\_\_\_\_\_

Referee(s) Involved:

\_\_\_\_\_

**Other Witnesses involved use back side to document names & phone numbers.**

Sport director notified: yes / no    Date & time notified:

\_\_\_\_\_

What happened that led up to the incident:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What occurred that you or involved parties believe deviated from CDAА policies, guidelines, or codes of conduct?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What was done to remedy the situation at the time of occurrence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Did all parties seem satisfied with the remedy: Yes / No  
If not, why:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use back side if more room is needed)

Submitted By: \_\_\_\_\_

Date:

\_\_\_\_\_  
Print name

Sign name: \_\_\_\_\_

Date:

\_\_\_\_\_  
Document update August 2003