

KPL Incident Report

Please explain, in the space below, all specific information regarding the incident that you are reporting with all pertinent facts including **place, names(if known), date and time of occurrence.**

Please check box(s) that apply

I would like to remain anonymous. I acknowledge that the results of the determination will be kept confidential.

I wish to discuss this issue directly with the Kingston Public Library(KPL) Director; please sign below. Indicate the best time for you.

Name_____Phone No._____

Date/Time_____

Fold this report in half, seal, mark with Attn. KPL Director.