

# **Facility Incident Report**

## University Programs

Please complete and submit to the Oakland University Center Office,  
Room F-102, at Seaholm High School or fax to (248) 647-2285.

Today's Date: \_\_\_\_\_ Date of Incident: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_

Course Number and Name: \_\_\_\_\_

Building/Room Number: \_\_\_\_\_

**FACILITY:** Please explain specific problem.

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**EQUIPMENT:**

\_\_\_\_\_ Did not receive equipment.  
Type of equipment requested: \_\_\_\_\_

\_\_\_\_\_ Equipment did not work. Please explain: \_\_\_\_\_

\_\_\_\_\_ Other. Please specify: \_\_\_\_\_

**Other:**

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University personnel please fax to BPS Community Education University Facilitator at (248) 203-3818.

