

Appendix A – Incident Report Form

**CONFIDENTIAL – ISU Incident Report Form**

**Remarks:** This Incident Report Form may be used to make a report to the ISU under Article 7 of the ISU Code of Ethics, but the Form is not required to make a report. You may always use the reporting channel you feel most comfortable with, such as this Form, a phone call, an email or other means. If you use this form to make a report, you do not need to fully complete it for the ISU to open an investigation. However, the more information you provide, the easier it is for the ISU to investigate and pursue the incident.

You should return this Form to the ISU Ombudsperson for Harassment and Abuse at ([ombudsperson@isu.ch](mailto:ombudsperson@isu.ch)).

<b>Your name</b>	
<b>Your email address</b>	
<b>Your phone number</b>	
<b>Your relationship to person(s) involved in the integrity incident (if not personally involved)</b>	

<b>Nature of Integrity Incident (check all that may apply)</b>			
Doping	Competition Manipulation	Abuse/ Harassment	Corruption (anything outside of Doping, Competition Manipulation or Abuse/Harassment)

<b>Subject of Incident</b>
Name(s) of any person(s) alleged to have been involved with the concern, include contact details if possible (e.g. phone number, email address, etc.) <sup>1</sup>

<sup>1</sup> For example, for a concern of Abuse/Harassment, provide the name/contact details of the victim(s) (if not person reporting) and the name of the person(s) involved in the abuse or harassment of the victim.

*Please give as many details as possible about the person(s) or organization involved in the Incident (e.g. job title, federation, role, etc.)*

**Description of Incident**

*Please give as many details as possible about what happened/what you observed or were told/what your concerns are about the athlete's welfare, etc.*

**Additional material/evidence**

*If available, please add any document, picture or video which may support your report.*

**Action taken**

*What has already been done about the Incident? Who has already been contacted (police; medical help; other local authorities; people close to the victim, etc.)? Please also include contact details of contacted parties.*

*Other relevant comments*

**To be completed by the ISU**

Confirm and specify the action that has been taken to respond to the report

Name of person to receive the report including signature

Date of case closing