



GUSTAVUS ADOLPHUS COLLEGE

800 W College Ave | Saint Peter, MN 56082 | 507-933-8888

Accident/Incident Form

In case of emergency/accident/ incident of any sort:

Contact the college first at 507-933-8888 (24 hours/day)
to report the incident and receive further instruction.

Day/Date: _____ Location: _____

Time: _____ a.m./p.m. _____

Name: _____

Driver's License Number: _____ State of Issue: _____ Birthdate: _____

Department/Organization: _____

Purpose of Travel: _____

Witnesses: _____

Description of Accident/Incident:

(Continue on back of form if more space is needed)

Signature: _____ Date: _____

Other Driver Information:

Name: _____

Driver's License Number: _____ State of Issue: _____ Birthdate: _____

Address: _____

Insurance Company Name/Address/Agent: _____

Signature: _____ Date: _____

SEND TO CAMPUS SAFETY WITHIN 24 HOURS