



Standing Rock Sioux Tribe
**INFORMATION TECHNOLOGY
DEPARTMENT**

sschreiber@standingrock.org
lwhitetemple@standingrock.org
dstarr@standingrock.org
droyal@standingrock.org
szephier@standingrock.org

P.O. Box D
Fort Yates, ND 58538
(701) 854-8551
(701) 854-8550
FAX (701) 854-8615

Incident Report Form

Employee Name: _____ **Date:** _____

Job Title: _____ **Phone/Ext.:** _____

Supervisor: _____ **Department:** _____

Type of Incident: Accident Theft Other _____

Date of Incident: _____ **Location of Incident:** _____

Describe the incident in detail: _____

I.T. Department Section Only:

Action Taken

Name: _____ **Date Received:** _____

Action Taken: _____

Supervisor

I.T. Department Director

cc: Executive Director
Human Resources