



CO-Incident Report

Colorado Incident Report

NOTE: On this page, you can enter additional information for state form. This includes information that is on the state form but not on GER. The fields you will see depend on event (s) you chose in the Add Event section in the GER form.

If you have selected 'Other' or any value in a GER field that does not correspond to state form, you will be asked for that information on this page.

Was the incident observed directly or was it reported to the agency?: Observed Reported

Has this type of behavior occurred with this person before?: Yes No

Is it likely that this behavior will reoccur?: Yes No

SIGNATURE: _____ **NAME** _____ **DATE** _____ **TIME** _____ **am/pm**