**Report A Concern Form**

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| **Name or Reporter**:  |
| *Optional but Recommended* |
| **Date of Concern**: |
|  *Day Month Date Year* |
| **Time of Incident**: |
|  *Estimated AM/PM* **Location of Incident**: |
| **In your own words, please describe the incident using specific details.** |
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Once the form is completed, it can be emailed to the Tutoring Coordinator, Katie Glover, at s\_glovekat@gvsu.edu