



Safer with
S C O U T™
Safety Culture Optimization, Understanding, and Training
a NobleSix Initiative



Threat Reporting Form

(Company Name)

Threat Reporting Form

Instructions: If you perceive a threat to safety or security within the company, please complete this form with as much detail as possible. Submit the form to your supervisor or the HR department immediately. Reports can also be submitted anonymously through the company's anonymous reporting system.

Part 1: Reporter Information (Optional)

- **Name:**
- **Department:**
- **Position:**
- **Contact Information:**

Part 2: Incident Details

- **Date of Incident:**
- **Time of Incident:**
- **Location of Incident:**

Part 3: Threat Description

- **Type of Threat (e.g., verbal, physical, written, electronic):**
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(Include specific words, actions, or behaviors observed. Be as detailed as possible.)

- **Potential Target(s) (if known):**

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- **Was the threat directed at a specific individual or group? If yes, please specify:**

Part 4: Witness Information

- **Were there any witnesses? (Yes/No):** _____
- **If yes, please provide their names and contact information:**

Part 5: Additional Information

- **Any previous incidents involving the same individual(s)? (Yes/No):**

- **If yes, please describe:**

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- **Additional Comments or Concerns:**

Part 6: Reporter Acknowledgment

(Optional for anonymous submissions)

I acknowledge that the information provided in this report is accurate to the best of my knowledge. I understand that providing false information may be subject to disciplinary action.

- **Signature:**
 - **Date:** (If no e-signature capability)
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For Internal Use Only

- **Received By:**
 - **Date Received:**
 - **Action Taken:**
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- **Follow-Up Required (Yes/No):** _____
 - **If yes, describe follow-up actions:**
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Confidentiality Notice: All reports will be handled confidentially, with information shared only on a need-to-know basis. The identity of individuals reporting threats will be protected to the extent possible.

Contact Information for Submission:

- **Supervisor/HR Contact:**
 - **Phone Number:**
 - **Email Address:**
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Emergency Contact Information:

- **Local Law Enforcement:**
 - **Security Office:**
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Thank you for helping to maintain a safe and secure environment at