

SCERC Grill Damage Report

Organization Name: _____ Date: _____

Advisor: _____ Event: _____

Please describe and identify the damage to the Grill(s) below:

If possible please explain how the damage occurred:

Advisor's Signature: _____

Advisor's Email: _____ Advisor's Phone #: (____) _____

As stated in the Agreements for using the Grills, SCERC will review this document at its next meeting and will respond as soon as possible with a decision on the repercussions. SCERC may want a representative from your organization as well as your Advisor present at the meeting to further explain the situation that occurred or to clarify any questions that may arise. SCERC will contact the Advisor in order if SCERC feels that representation at the meeting is necessary.