

Appendix "B"

INCIDENT REFERRAL FORM

TO: [Insert League]
E mail
Fax]

I, the undersigned give notice I wish to refer an incident which may constitute a Reportable Offence under the Laws of the Game or a Breach of the Code of Conduct.

Round: _____ **Match:** _____ **vs** _____

Venue: _____ **Date:** _____

Person(s) involved (please state offending person/s): _____

Reportable Offence or Code of Conduct Breach: _____

Type of Reportable Offence/ Infringement (s): _____

Note:

The spirit of a Citing by-law is to provide a means for the investigation of serious incidents which occur behind the play or which go unnoticed by the Umpires.

A serious incident for definition is a matter that may draw a base sanction of three or more matches in accordance with the grading table contained in the AFL NSW/ACT Tribunal Guidelines 2020, or as otherwise determined by the CMC based on the recommendation of the investigating officer. See over for suggested grading Table.

With all citing submissions at least one witness statement should be included.

Vicinity at Venue: _____

Quarter: _____ **Time of Incident:** _____

Other relevant information: _____

Where a Classifiable Offence, as defined under 5.3 (a) of the AFL NSW/ACT Tribunal Guidelines 2020 is the reason for the citing use the table on next page to indicate the level of conduct alleged.

	Impact	Area struck	Tick suggested
Intentional Conduct	High	High/Groin	
		Body	
	Medium	High/Groin	
		Body	N/A
	Low	High/Groin	N/A
		Body	N/A
Careless Conduct	High	High/Groin	
		Body	N/A
	Medium	High/Groin	N/A
		Body	N/A
	Low	High/Groin	N/A
		Body	N/A

Impact Guidelines	
Low	Minimal or no impact on the match - the Player continued to play the majority of the match and suffered no or minimal ongoing issues.
Medium	Clearly some impact on the Player, and / or the Player left the field for a lengthy period of time, and/ or some possible lower level ongoing treatment(s) required.
High	Major impact on the Player, and / or the Player was unable to participate in the remainder of the game, and / or major ongoing issues that require medical intervention and / or may miss some matches.
Severe	Major impact and serious injury to the Player, and / or likely to miss a significant number of matches.

Print Name: _____ Club: _____ (if applicable)

Signed: _____ Dated: _____

Umpire / Umpire Observer / Umpire Coach / Club Official / other _____

_____ (Please Circle)

This form is to be completed and lodged, along with the deposit in accordance with the League By-Laws

League use only: Lodged with League on ____ / ____ / ____ at ____ (time)
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