

Incident (Injury) Report – Catholic Central High School, Steubenville, Ohio

Name of injured party _____ Phone number _____

Complete address _____

Names of witnesses and their complete addresses and phone numbers _____

DESCRIBE THE INCIDENT: (State what the individual was doing and all circumstances leading up to the incident. Try to reconstruct the chain of events leading up to the incident/injury. Be specific.)

Who was involved? _____

What took place? _____

On when date did it occur? _____ Hour of incident _____ AM or PM _____

Where did it happen? _____

Why did it happen? _____

How did it happen? _____

CORRECTIVE ACTION:

In your opinion, was this incident preventable? Yes _____ No _____

If yes, state why. _____

What action have you taken or do you propose taking to prevent a similar incident from taking place? _____

TRAINING:

Have you provided any training to prevent a similar incident from taking place? _____

Incident investigation conducted by (list individuals): _____

Signature of person in charge _____ Date _____