



Incident Report Form

This report is to be filled in by a Class Leader or other people involved in an incident as soon as possible after the incident. If you need additional space, please write on the back of this form. **Advise the Secretary or President ASAP.**

Return the completed form as follows:

Scan / photograph and email to secretary@kempseymacleay3a.com.au

Drop into letter box on front wall of 46a Tozer Street

Date of Incident: Time of Incident:

Location: Class:

Name / Contact Details of Persons Involved:

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Description of Incident:

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Were any injuries incurred? Yes / No (Please circle)

Description of Injuries:

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Was outside assistance required? Yes /No (Please circle)

Was the emergency contact notified? Yes /No (Please circle)

Details of all actions taken: (include info on outside assistance/ emergency contact)

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Name / Role / Contact Details and Signature of any Witnesses:

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Report Completed By: Date of Report:

Title / Role: Class:

Signature of Person Completing Report: