

STUDENT ACCIDENT REPORT

Student Name: _____

Grade: _____

Building: _____

Activity/Class: _____

Date of Accident: _____ Time: _____

Where did the accident happen?

How did the accident happen?

Where was the student injured? (physical condition or type of injury)

Who was informed of the injury?

- 1.
- 2.
- 3.

Staff Member signature: _____

Date: _____