Design and Technology : Accident Report Form

Contact details:

1. Name of person reporting :

2. Address :

3. Contact telephone number :

4. Name and address or contact details of injured person :

5. Name of person in charge *(e.g. course or event organiser)*

Details of incident/accident : *(note: this should be factual and not express an opinion)*

6. Date and time incident/accident occurred

7. Location of incident/accident *(e.g. school hall, workshop, gym, stage, car park, etc. – give room number if there is one)*

8. Nature of incident/injury and extent of injury

9. Was the incident due to any mains utility service fault? *(e.g. electricity, gas, water)*

Actions taken:

10. Were any of the following contacted?

Parents/carers	**Yes/No**
Police	**Yes/No**
Ambulance	**Yes/No**
Fire Service	**Yes/No**

11. Was any First Aid administered? *(describe if yes)*   **Yes/No**

12. What happened to the injured person following the incident/accident? Did they require further treatment? *(e.g. carried on with session, went home, went to hospital etc.)*