

Volunteer Incident Report Form

This form should be completed for every accident, injury, dangerous event, or near miss that takes place while volunteering for BREAZE. A near miss is an incident which could have caused injury or damage to property. The purpose of this form is to document the events, find their causes, and prevent future incidents.

Please complete the details below and attach all relevant documentation

Name:

Telephone No:

Email address:

Postal address:

Details of the Incident

When did the incident occur?

Date: ____ / ____ / ____ **Time:** ____ (am) ____ (pm)

What was the nature of the incident?

e.g. personal injury, damage to property, dangerous event

Where did it occur?

What were the circumstances?

What activities were taking place before the accident, what happened during the accident and why you think the accident occurred?

Where other people involved?

Directly or present at incident

Was first aid treatment provided?

YES

NO

If yes – please give details:

Was medical treatment required?

YES

NO

Were there any witnesses?

YES

NO

If yes – Name of witness:
Address:
Telephone No:

Future Needs

What actions should be taken to prevent a similar accident in the future?

Office use only: Action taken by the responsible person to prevent reoccurrence:

Authorised Person: Name:
Position:
Signature: