

## Completed Accident Report - Example

Activity 2: Sample Completed Accident Report

Appendix 2.1

| Accident Report Form   |                              |
|------------------------|------------------------------|
| Name of Injured Worker | <u>John Smith</u>            |
| Date                   | <u>October 13, 1999</u>      |
| Type of Injury         | <u>Sprained wrist.</u>       |
| Cause of Injury        | <u>Slipped on wet floor.</u> |
| <hr/>                  |                              |
| Time of Injury         | <u>3:45 PM</u>               |
| Remarks:               | <u>No caution sign</u>       |
| <hr/>                  |                              |
| Signature              | <u>John Smith</u>            |
| Witness                | <u>Bob Davis</u>             |

Go to the next page and completed the missing sections of the accident report. You can refer to page one for help.

Activity 2: Sample Partially Completed Accident Report

Appendix 2.2

Name: \_\_\_\_\_

Date: \_\_\_\_\_

|                                           |
|-------------------------------------------|
| Type of Injury <u>Fractured right arm</u> |
| Cause of Injury _____                     |
| Remarks: _____                            |

|                                                  |
|--------------------------------------------------|
| Type of Injury _____                             |
| Cause of Injury <u>Spilt corrosive substance</u> |
| Remarks: _____                                   |

|                                                           |
|-----------------------------------------------------------|
| Type of Injury _____                                      |
| Cause of Injury _____                                     |
| Remarks: <u>Box was not labelled as</u><br><u>'Heavy'</u> |