Incident Report

Received by:	(Parent)	Date:	
Reported by:	(Caregiver/tead	cher)	
Notes:			
Who contacted a parent by phone?	Voice	email or actual conve	rsation? (circle one)
Who was supervising the group at the			
Describe what the injured child was			
Describe the treatment			
Was the skin broken?			
Describe the injury			
Describe what happened			
Location of incident	•		•
Date of incident/	Day of week	Time of d	ay
Name of injured child		Child's age _	yrs/months

(Give this form to the parent and keep a copy in the child's file)