

BUILD Health and Safety Incident Report

All information provided will be kept confidential.

Name: _____ Phone Number: _____

Email: _____ Site: _____

1. On what date did the incident happen?

2. At what time did the incident happen?

3. Where did the incident happen?

- ☐ At your site.
- ☐ On the way to your site. Give specific location: _____
- ☐ On the way home from your site. Give specific location: _____

4. Describe the incident.

5. How many people were involved in the incident and in what ways were they involved?

6. Did this incident affect any other BUILD tutors?

7. Did you report the incident to anyone (e.g. police, teacher, BUILD site contact)? If so, who?

8. Did the incident cause injury to you or anyone else?

If yes, please describe the injury and any medical treatment?

Where was medical treatment administered?

9. Did the incident occur on public transportation on the way to or from your site?

10. Did the incident involve the BUILD Van?

If yes, has a van accident report been filed?
