

**FAITH SCHOOL DISTRICT #46-2  
ACCIDENT/DAMAGE REPORT**

**DATE OF ACCIDENT:** \_\_\_\_\_ **TIME:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

**NATURE OF ACCIDENT (IF AN INJURY WAS SUSTAINED, PLEASE LIST THE NAME(S) OF STUDENT OR STAFF MEMBER INJURED, HOW IT OCCURRED, WHO WAS INVOLVED, AND THE ACTION TAKEN):**

**IF DAMAGE WAS SUSTAINED TO PROPERTY, PLEASE LIST THE NATURE OF THE DAMAGE (IF A SCHOOL VEHICLE WAS INVOLVED, IDENTIFY THE VEHICLE AND WHERE THE DAMAGE WAS SUSTAINED):**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

