

Playground Incident Report Form

Date of Incident**Time of Incident****Location on Playground**

e.g. Near slide, swings

Weather Conditions

e.g. Sunny, Rainy

Student(s) Involved

List full names

Staff Present

List supervising staff

Description of Incident

Provide detailed description...

Immediate Action Taken

Describe any first aid, separation, etc.

Witnesses (If any)

List names and contact if needed

Reported By

Your name

Date Reported**Follow-Up / Additional Notes**

Additional comments or follow-up actions