

Student Accident Notification of Injury

PART I – SCHOOL REPORT					
Name of School	Phone Number	School District			
Student Name (Last, First, Middle)	SSN	Grade	Date of Birth	Sex	Is Student Homeschooled?
Nature of Injury - Please describe fully indicating what body part was injured – i.e. broken arm, sprained ankle, etc.					
Describe how accident occurred - Use a separate sheet if needed. Must be a bodily injury directly due to a covered accident					
Did accident occur (Yes or No)	Date of Accident	Name of Activity			
While student was supervised?		Name and Title of Supervisor			
During sponsored activity?	Time of Accident				
During programmed hours?		Place of Accident			
On activity premises?	Place of Accident				
While traveling directly and without interruption to or from home premises and school for regular school sessions or school sponsored and supervised activities?					
Signature of School Officer	Title	Date			
Name of Father or Guardian			Name of Mother or Guardian		
Address of Parents or Guardian	City	State	Zip	Phone Number	
Name / Address / Telephone of Father's or Guardian's Employer			Name / Address / Telephone of Mother's or Guardian's Employer		

PREPARER'S CONTACT INFORMATION		
Preparer's Name	Preparer's Phone	Preparer's Email