

STUDENT ACCIDENT REPORT

Confidential School Accident Report

CONFIDENTIAL-ATTORNEY/CLIENT WORK PRODUCT PRIVILEGE

This report is to be completed by district employees. This form is a confidential, internal, document: its contents are not to be shared or copied for any persons who are not district employees and/or their legal representatives.

IN CASE OF SERIOUS INJURIES A TELEPHONE REPORT IS TO BE MADE IMMEDIATELY.

San Diego		San Diego Office of Education		Administration	
STUDENT		AGE	GRADE	HOME ADDRESS	PHONE
DATE OF INJURY	TIME OF INJURY	DID INJURY RESULT FROM VIOLENCE OR AGGRESSION? <input type="checkbox"/> YES <input type="checkbox"/> NO		WAS FIRST AID GIVEN? <input type="checkbox"/> YES <input type="checkbox"/> NO	BY WHOM?
DESCRIBE FIRST AID PROVIDED:					
WAS THERE A VIOLATION OF SCHOOL RULE BY THIS STUDENT OR ANYONE ELSE?				<input type="checkbox"/> YES <input type="checkbox"/> NO	EXPLAIN:
WHO ELSE WAS INVOLVED BESIDES STUDENT?		<input type="checkbox"/> Another Student	<input type="checkbox"/> Outside Person	<input type="checkbox"/> Unknown	<input type="checkbox"/> No One
WITNESSES (ADDRESSES AND PHONE NUMBERS)			EMPLOYEE IN CHARGE (ADDRESSES AND PHONE NUMBERS)		
BRIEFLY DESCRIBE HOW INJURY OCCURRED:					
WERE PARENTS CONTACTED?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
DESCRIBE THEIR REACTION:					
STUDENT WAS: <input type="checkbox"/> Returned to class <input type="checkbox"/> Sent home <input type="checkbox"/> Taken to hospital <input type="checkbox"/> Other (Specify):					
COMMENT:					
For your protection, California law requires the following to appear on this form. "It is unlawful to: (a) present or cause to be presented any false or fraudulent claim for payment of a loss under a contract of insurance; (b) prepare, make or subscribe any writing with intent to present or use the same, or allow it to be presented or used in support of such claim. Every person who violates any provision of this section is punishable by imprisonment in the State Prison not exceeding 3 years or by fine not exceeding \$1,000 or by both."					
REPORT COMPLETED BY:		TITLE:		DATE:	PHONE: