

STUDENT INJURY REPORT

Ann Arbor Public Schools - 2555 S. State St. - Ann Arbor, MI 48104

This report should be completed and filed with the Operations Division Office for property loss incidents and personal injuries to students and public individuals. **Employee Injuries:** MIOSHA Form No. 101 should be completed for Workers' Compensation incidents and sent to Human Resources Services, 994-4517.

Injured student:	Age:	Grade:	School:	School phone:
------------------	------	--------	---------	---------------

Date of incident:	Time of incident:	Parents notified:	Student to hospital:
		<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No

Parent/Guardian:	Home address:	Parent phone:
------------------	---------------	---------------

Description of injuries:

What treatment was administered on-site:	By whom:
--	----------

Person completing report:	Phone:	Today's Date:	Is principal/supervisor aware:
			<input checked="" type="radio"/> Yes <input type="radio"/> No

Principal/Supervisor:	Principal/supervisor phone:
-----------------------	-----------------------------

Principal / Supervisor's Incident Evaluation:

Were there contributing factors leading to this event:

Additional comments: