

Springfield Library
Springfield Center, NY 13468
Incident-Accident Report Form

Incidents including, but not limited to, trespass, nuisance or disturbance on library premises, verbal abuse, sexual or racial abuse, threats, aggression, physical violence and intentional damage to personal property.

Accidents including, but not limited to, any undesirable or unfortunate happening that occurs unintentionally and usually results in harm, injury, damage, or loss.

Relevant sections of this form should be completed as fully as possible (please use a continuation sheet if necessary). For an incident or accident (issue) involving or witnessed by a minor, a library employee should complete the form on their behalf. However, any discussion between one witness and another should not precede completion of the form, at this might lead to allegations of collusion.

Subject of Issue:

Name: _____ M ___ F ___

Home Address: _____

City: _____ State/Zip Code: _____

Date of Birth: _____ Telephone: _____

Date/Time Occurred: _____ Date/Time Reported: _____

Member of staff reporting issue:

Name: _____ Position: _____

Witnesses:

Name 1: _____ Telephone _____

Name 2: _____ Telephone _____

Name 3: _____ Telephone _____

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Describe issue to best of your recollection (attach additional pages if necessary).

a) Type of issue (if assault, provide details of any injury suffered, treatment received, etc.)

b) Location of issue (attach sketch, if appropriate)

Outcome (whether police called, whether parents contacted, what happened after the issue, any legal action)

c) If Police/Emergency services called: agency responding, name and contact details of police/emergency officer involved, was arrest made, and incident number or crime reference number, as appropriate
