



# Incident Report Form: Unscripted

(Please complete and submit to Studio Director)

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## 1. Incident Details

- **Date of Incident:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (DD/MM/YYYY)
- **Time:** \_\_\_\_: \_\_\_\_ AM/ PM
- **Location:** \_\_\_\_\_
- **Type of Incident (check one or more):**
  - ☐ Injury
  - ☐ Near Miss
  - ☐ Property Damage
  - ☐ Other (Specify): \_\_\_\_\_

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## 2. Person(s) Involved / Affected

- **Name(s):** \_\_\_\_\_
- **Role(s):**
  - ☐ Student
  - ☐ Staff
  - ☐ Other (Specify): \_\_\_\_\_
- **If Injury, describe briefly:**

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## 3. What Happened? (Brief Description)

- Describe the incident concisely, including key events:

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## 4. Immediate Actions Taken

- (e.g., First aid given, area secured, parent/guardian contacted, equipment turned off)

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#### 5. Reported By

- **Your Full Name:**

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- **Date of Report:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

- **Signature:** \_\_\_\_\_