Part I – Employee Information (can use for Student/Faculty/Staff/Visitor)

Name of injured employee: Date of injury:

Employee ID #: Time of injury:

Job title: Department:

Best way to contact this employee:

Employee email address: Employee phone number:

Supervisor name: Supervisor phone number:

Not Work Related, reported as FYI

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Part II – Description of Injury or Incident

Location on Campus where the incident occurred:

Job task at the time:

Are you reporting a work related injury? YES NO

Nature of Injury:

Body parts involved:

First aid required? YES NO

Care provided by:

Any additional information you can provide, including witnesses (if any):

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Part III – Supervisor Comments

Incident reported to me on: How were you notified:

If there was a delay in reporting this incident, why the delay?

What can be done to prevent this type of incident from happening again?

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Part IV – Signatures

Employee signature: Date:

Supervisor signature: Date:

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Part V – INSTRUCTIONS

If this is an emergency call Bates Security 207-786-6111 or 911 for assistance.

If it is not an emergency, or following the immediate medical need being satisfied:

* Ensure this complete form is immediately submitted to HR, by email to Jim Morrison, [jmorriso@bates.edu](mailto:jmorriso@bates.edu) or to [benefits@bates.edu](mailto:benefits@bates.edu) . OK to type and email, handwrite/scan/email, or handwrite/deliver to HR office at 215 College Street.
* If your employee requires medical attention, contact Jim for assistance
* If you need blood spill cleanup, contact Security at 207-786-6254 to page an on-call blood spill team member for assistance

Jim will contact you/the employee regarding an injury or incident investigation, if required.

The benefits team will contact the employee if additional information is needed for worker’s compensation and regarding medical care, if any.

Date report sent to HR: