Safety Report Template

1. Incident Details

Date:

_____

Time:

_____

Location:

_____

Type of Incident:

_____

2. Personnel Involved

Names:

_____

Roles:

_____

Departments:

_____

3. Description

Incident Description:

_____

Immediate Actions Taken:

_____

4. Root Cause Analysis

Primary Cause:

_____

Contributing Factors:

_____

5. Corrective Actions

Immediate Actions:

_____

Long-term Prevention: