|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CREW ACCIDENT – CREWMEMBER’S STATEMENT |  |  |  |  |  | | | | | Report No. (e.g. DIA/001/00/C)       /C |  |
| **PRIVATE & CONFIDENTIAL - FOR THE ATTENTION OF COMPANY SOLICITORS** |  |  |  |  |  |  |  | | | | |
| Full Name | | | | | | | | | | Crew. No. | |
| Date of Birth | | | | | | | | Age | Nationality | Rank/Rating | |
| Sex | | | | | | | |  |
| Please state in your own handwriting and as accurately as you can :  - The date and time the accident occurred. | | | | | | | | | | | |
| - Where the accident occurred. | | | | | | | | | | | |
| - How you sustained your injury. | | | | | | | | | | | |
| - The nature of your injury (including the exact part of your body that is injured). | | | | | | | | | | | |
| Signature | | | | | | | | | Date | | |