



JONES CENTER

Harold Colbert Jones Memorial Community Center

Providing a Doorway to Opportunity Since 1917

ACCIDENT REPORT

Student Name:

Student Grade:

Program Site:

Location of accident:

Date of accident:

Time of accident:

Witnesses:

How did the accident happen:

What was the student doing at the time of the accident:

Describe extent of the injury:

Steps taken by staff member:

Staff member name:

Date: