

FAIRLAND BOARD OF EDUCATION		CRE-E
<i>Adoption Date: August 14, 2023</i>		
<i>Revision Date(s):</i>		<i>Page 1 of 1</i>

ACCIDENT REPORTING STANDARD

1. "I understand that I am to report immediately to my supervisor any accident or incident that causes injury."
2. "I understand that, if I fail to report an accident or incident, the company will seriously doubt the validity of my claim, because I will have openly denied the company the right to conduct a legitimate accident investigation."
3. "I realize that I am not to start any work shift without first reporting any condition (physical or otherwise) that could impair my ability to perform my normal job function."

By my signature below, I agree to abide by the above-mentioned terms.

I, _____, have had the opportunity to ask questions, and the questions I asked, if any, were answered to my satisfaction.

Employee's Signature

Witness Signature

Printed Name

Printed Name

Date

Date