

## NYSHS Officials Accident Report Form

Date of this report \_\_\_\_\_

Name of school official in charge \_\_\_\_\_

Assigned officials names \_\_\_\_\_

Date of incident \_\_\_\_\_ Time of incident \_\_\_\_\_

Name of injured \_\_\_\_\_ Level of competition \_\_\_\_\_

Contested sport \_\_\_\_\_

Location of contest \_\_\_\_\_

Schools competing \_\_\_\_\_

Weather conditions \_\_\_\_\_

Type of suspected injury \_\_\_\_\_

Name(s) of school official(s) treating suspected injury, if any treatment was given \_\_\_\_\_  
\_\_\_\_\_

Description of incident \_\_\_\_\_  
\_\_\_\_\_

Action taken by school official (s) in charge \_\_\_\_\_

Name(s) and action taken by others administering to suspected injury \_\_\_\_\_  
\_\_\_\_\_

Name(s) and telephone numbers of witnesses \_\_\_\_\_

Name and address of official making this report \_\_\_\_\_

Send copies e-mail or fax to; Sharon Favor- [SharonF@paris-kirwan.com](mailto:SharonF@paris-kirwan.com)

Sharon Favor (phone 585-461-6425; fax 585-340-1714)

Paris-Kirwan Associates, Inc.

255 East Main Street

Rochester, NY 14604