

# Colville Confederated Tribes Supervisor's Accident Report of Injury

**Employment Status (circle all that apply):**

**Accident Classification (circle all that apply):**

Full time      Part time      Temporary  
 On-Call      Seasonal      Wex  
 Contract      Stipend      Summer Youth

First Aid only      Death  
 Medical Treatment      Lost time

1. Name: \_\_\_\_\_ Home/Mobile Phone: \_\_\_\_\_
2. Department: \_\_\_\_\_ Occupation/Title: \_\_\_\_\_
3. Hourly rate of pay: \_\_\_\_\_
4. Date of hire: \_\_\_\_\_
5. Provide employees work schedule (hours per day/days per week)? \_\_\_\_\_  
 If seasonal, give total weekly hours: \_\_\_\_\_ Regular days off: \_\_\_\_\_
6. Last date worked: \_\_\_\_\_ Location of incident: \_\_\_\_\_
7. Date and time of Incident: \_\_\_\_\_
8. Date and time incident was reported to Supervisor: \_\_\_\_\_
9. Date and time Supervisor reported to Risk Management: \_\_\_\_\_
10. Was the employee engaged in regular course of his/her duties at time of accident:      YES      NO
11. If NO, explain: \_\_\_\_\_
12. Provide description of accident/exposure: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. Part of body affected: \_\_\_\_\_ Left      Right

**Please circle all that apply:**

1. Inadequately Guarded	1. Operating without authority
2. Unguarded	2. Operating at unsafe speed
3. Defective tools, equipment, or substance	3. Making safety devices inoperable
4. Unsafe design or construction	4. using unsafe equipment or equipment unsafely
5. Hazardous arrangement	5. Unsafe loading, placing, mixing
6. Unsafe illumination	6. Taking unsafe position
7. Unsafe ventilation	7. Working on moving or dangerous equipment
8. Unsafe clothing	8. Distraction, teasing, horseplay
9. Insufficient instruction	9. Failure to use personal protective devices
10. Other: _____	

14. Why was the unsafe act committed: \_\_\_\_\_
15. Why did the unsafe conditions exist: \_\_\_\_\_
16. What was the job assignment at time of accident: \_\_\_\_\_
17. List Witnesses (attach statements): \_\_\_\_\_
18. Guides to corrective action:
  - A. Unsafe acts  
 Stop behavior      Study the job      Instruct (tell, show, try, check)      Follow up 5. Enforce
  - B. Unsafe Conditions  
 Remove      Guard      Warn      Supervisor Training
  - C. If Supervisor can't handle, then recommend to:  
 Boss      Safety Committee      Maintenance      Follow up with: \_\_\_\_\_
19. Actions taken to prevent future injuries:  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
**Immediate Supervisor's Signature**

\_\_\_\_\_  
**Date Received**

\_\_\_\_\_  
**Risk Management Signature**

\_\_\_\_\_  
**Date Received**