

**PARK COUNTY SCHOOL DISTRICT #6
BOARD OF EDUCATION POLICY**

CODE EBBB-E(2)

**PROPERTY DAMAGE
ACCIDENT REPORT FORM**

Date of Accident _____ Time of Accident _____ a.m.-p.m.

Where Accident Occurred _____

Accident Reported by Nature of Accident _____

Describe any action taken as a result of the accident _____

Police Called: Yes No

Fire Department Called: Yes No

Superintendent Called: Yes No

Other Called _____

Signature of Person Reporting Accident _____

Principal's Signature _____

Use back of this sheet for additional information.

Adopted: 1/20/98