I-PATH
International Performing Arts & Theatre

ACCIDENT & INCIDENT REPORT FORM

Last Reviewed: 31st July 2025

Accident Reference No (Local Reference):	

ACCIDENT/INCIDENT REPORT FORM

PART A – ABOUT THE PERSON WHO HAD THE ACCIDENT

Full Name:	Role in I-PATH / School:

Home Address:	
	Post code:

Home Tel No:		DOB:		Gender:	

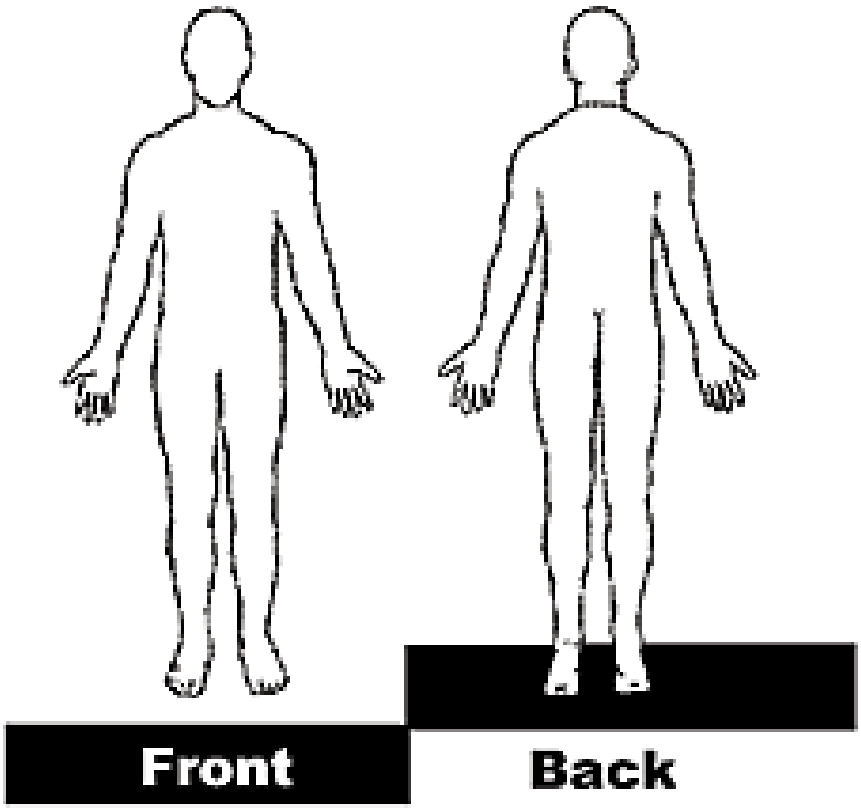
PART B – ABOUT THE INCIDENT

Date of Accident/Incident		Time (use 24hr format)	

Where did accident/incident occur?		
Address of where accident/incident happened		
	Postcode:	Telephone number:

How did the incident happen, provide a cause/account of the occurrence:

If the person suffered injury, state what the injury was and where on the body (Use Body Map to help):



State what treatment was given/action taken:

What was the accident/incident? (Please tick only one)

A fatality	
A major injury or condition resulting in an ambulance taking person to hospital	
A minor injury or condition resulting in the person going to hospital/professional medical help	
A minor injury or condition treated onsite	
An incident involving a member of the public	
A safeguarding Incident	
A violent incident *(physical assault, verbal abuse, threatening behaviour)*	
A near miss	

Was the person absent from work/school as a result (please circle)? YES / NO

Please note: Further Investigation may be required for some accidents/incidents, if unsure consult the Directors

PART C – ACTIONS TO PREVENT A RECURRENCE

Risk assessment completed or reviewed?	**YES**	**NO**
Please state action taken to prevent recurrence:		

PART D – ABOUT YOU, THE PERSON COMPLETING THE FORM

NAME (print):	
Personal Address:	**Post code:**

Role:	

Signature:	**Date:**
School Manager Signature:	**Date:**

Please return completed form to: info@i-path.org

FOR I-PATH HEAD OFFICE TO COMPLETE

Date Received:		**Director Investigating:**		**Reportable to Authorities?**	**YES/NO**
		Director Signature:		**National Director Team Reference:**	
Further Investigation required:	**Yes / No**	**Re-training/review meeting required?**	**Yes / No**	**Local visit to school/branch required?**	**Yes / No**
Notes:					