**Aston Students’ Union – Club/Society Accident & Near Miss Reporting Form**

**This form should be used to report any accidents to Aston Students’ Union or a “near miss”.
A near miss is an accident that could have resulted in injury but did not.
Any accidents should be reported as soon as possible after the event and usually no more than 24 hours.**

**IF AN ACCIDENT OCCURS OUTSIDE OFFICE HOURS OR RESULTS IN A DEATH OR SPECIFC MAJOR INJURY, INFORM ASTON UNIVERSITY SECURITY IMMEDIATELY ON 0121 204 2222 AND THEN COMPLETE THIS FORM.**

**About the person completing the form**

**Name (in full):** Click here to enter text.

**Today’s date:** Click here to enter a date.

**Club/society/group:** Click here to enter text.

**About the Incident**

**Are you reporting an accident or a near miss?** Choose an item.

An accident is an incident where harm has been caused to an individual or group of individuals.
A near miss is an incident where harm could have caused but was not.

**About the Injured Person(s)**

**Injured person(s) name (in full):** Click here to enter text.

**Date of birth:** Click here to enter a date.

**Status:** Click here to enter text.

**Club/society:** Click here to enter text.
If this happened during a student activity, please state the activity not the University department.

**Phone number:** Click here to enter text.

**Email:** Click here to enter text.

**Home address:** Click here to enter text.

**Details of Witness**

**Witness name:** Click here to enter text.

**Phone number:** Click here to enter text.

**Email:** Click here to enter text.

**Address:** Click here to enter text.

**Please list any additional witnesses and their phone numbers here:** Click here to enter text.

**Details of the Injury**

Click here to enter text.

Please give us as much detail as possible, left or right as appropriate, part of the body etc. E.g. cut to left hand

**Details of the Accident/Near Miss**

**Date of accident:** Click here to enter a date.

**Time of accident (HH:MM:SS AM/PM)** Click here to enter text.

**Where did the accident or near miss occur?** Click here to enter text.

**Describe what happened:** Click here to enter text.

Please state the work or process being carried out at the time of the accident and how the accident occurred.

**Did a first aider attend? Yes**[ ]  **No**[ ]

**If yes, give their name and contact details if available:** Click here to enter text.

**What treatment was given?** Click here to enter text.

Please give as much detail as possible.

**Did the injured person(s) go to hospital?** **Yes**[ ]  **No**[ ]

**If yes, which hospital?** Click here to enter text.

**Club/society Safety Representative Notification**

**Has your Safety Representative to be told of this accident/near miss? Yes** [ ]  **No**[ ]

**For insurance purposes it is essential that Aston Students’ Union is notified of any incident as soon as reasonably practicable. This form should be submitted to the Student Activities office.**