

## Appendix E. Non-Injury Incident Reporting Form

Campus: \_\_\_\_\_ Room: \_\_\_\_\_ Time/Date: \_\_\_\_\_

### I. Type of problem (to be filled out by person reporting the problem)

|                                   |                                  |
|-----------------------------------|----------------------------------|
| _____ equipment failure           | _____ missing equipment/supplies |
| _____ lack of cleanliness         | _____ electrical hazard          |
| _____ unknown/unlabeled chemicals | _____ water leak/hazard          |
| _____ spill                       | _____ ventilation hazard         |
| _____ security problem            | _____ facilities failure         |

### II. Nature of problem (to be filled out by person reporting the problem)

Please describe the problem and its location.

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Name: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### III. Problem Resolution (to be filled out by person(s) resolving the problem)

Please indicate who addressed the problem and how it was handled. Indicate what follow-up measures were taken, if applicable.

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Name: \_\_\_\_\_ Date: \_\_\_\_\_

fax to: Debbie Sackett (for Chemistry) at 223-2046 or Sarah Strong (for Biology) at 223-6769 or Bob Blodgett (for Physical Sciences) at 223-4641.