

UNIVERSITY OF MISSOURI

**STUDENT OR GENERAL PUBLIC INJURY AND PROPERTY DAMAGE REPORT**  
**(DO NOT USE FOR VEHICLE ACCIDENTS)**

**INSTRUCTIONS:** Accidents and incidents resulting from, arising out of and directly relating to the University's premises (owned, rented or leased) and operations; or resulting from, arising out of and directly relating to an employee's position of employment by the University, are to be reported on this form, provided;  
(1) the accident is a result of a University activity;

INDICATE WHETHER THIS IS A REPORT OF AN ACCIDENT OR INCIDENT OR BOTH:	1. DATE OF REPORT
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2. DATE OF OCCURRENCE	3. TIME OF OCCURRENCE	4. LOCATION (name of bldg. room No. or describe University property)
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5. FULL NAME OF INJURED OR AGGRIEVED PERSON	6. TELEPHONE	7. SEX	8. AGE (actual or apparent)
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9. ADDRESS (if student, give campus address)	10. MARRIED	11. STATUS
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12. DESCRIBE DETAILS OF THE OCCURRENCE INCLUDING YOUR OPINION AS TO HOW BODILY INJURY, PROPERTY DAMAGE OR PERSONAL INJURY OCCURRED AND HOW YOU OBTAINED THE INFORMATION. ATTACH COPIES OF ANY CORRESPONDENCE, POLICE REPORTS OR ANY OTHER INFORMATION AVAILABLE WHICH MIGHT ASSIST IN THE INVESTIGATION OF THIS OCCURRENCE.

13. DESCRIBE FULLY THE SPECIFIC PART OF THE BODY INJURED AND NATURE OF INJURY

14. DESCRIBE DAMAGE TO PROPERTY OF OTHERS AND ESTIMATE COST TO REPAIR OR REPLACE PROPERTY

