

## Incident Report

Use this form when:

- √ A bus driver is involved in a situation with a passenger or member of the community.
- √ Passengers are breaking policy.
- √ A driver is involved in a near miss.
- √ A driver witnesses wrong behavior of a coworker.

Date \_\_\_\_\_ Time \_\_\_\_\_

Driver Name \_\_\_\_\_ Vehicle identification \_\_\_\_\_

Passenger(s) name(s) \_\_\_\_\_

Describe what happened in detail:

Explain what action(s) you took:

Were you exposed to any body fluids? (Circle one) YES NO

Driver Signature \_\_\_\_\_ Date \_\_\_\_\_

---

This section to be filled out by supervisor.

Time reported to supervisor \_\_\_\_\_

Action taken by supervisor:

Was the incident reported to the authorities? (Circle one) YES NO

If yes, who and when: