

## **Accident or Injury Report**

**DANIEL MORGAN** TECHNOLOGY CENTER

Serving Spartanburg County School Districts Three and Seven

Name:		Department:		
Home School or Section:		Sex:	Age:	
Parents Name:				
Home Address:				
Time Accident Occurred:		Date:		
Nature of Injury (pick from drop-down list):				
Part of Body Injured (pick from drop-down list):				
Cause of Injury (Description of how and where the accident happened)				
Treatment or first aid given (Describe)				
Was further treatment nec	essary:			
If yes where?:				
Doctor:	Was P	Parent Notified?:		
Accident Witnessed By:				
Remarks:				
Signature of Person Reporting:			Date:	

**Statement of Non-Discrimination** 

Spartanburg School District Three does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs or activities and provides equal access to the Boy Scouts and other designated youth groups. The following person(s) has been designated to handle inquiries regarding the nondiscrimination policies: Director of Pupil and Personnel Services \* 3535 Clifton Glendale Road \* Glendale, SC 29346 \*(864)279-6000 \* rgoode@spartanburg3.org