



Special Kare for Special Kids

Incident Report Preschool/CBRS

Date of Incident: _____

Location of Incident: _____

Staff Name: _____

Describe Incident Fully with all Details Included:

******Parents: If an incident or injury occurs with your child, you will be notified verbally and given a copy of this incident report describing the events that occurred and actions taken by the Special Kare staff involved.**

Signature of Staff: _____

Signature of Supervisor: _____

Phone calls made to supervisor: _____

Phone calls made to parent or case manager _____

