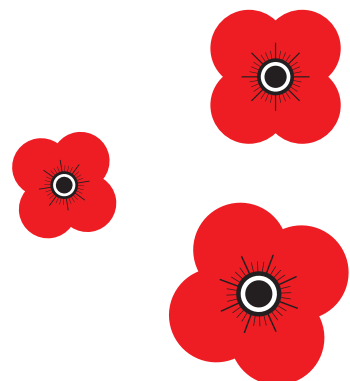




Revised Spring 2021

Poppyscotland
Volunteer Charter - Annex D



Poppyscotland accident report form

For assistance with completing this form please see the health and safety policy in the Poppyscotland Volunteer Charter.

<p>Personal details of person(s) involved in the accident</p>	<p>Name: Address: Telephone: Sex: Age:</p>	<p>.....</p>
<p>About the accident</p>	<p>Date it took place: Time it took place: Where it took place:</p>	<p>.....</p>
<p>About the accident - further details</p>	<p>What were you doing when accident occurred?</p>	<p>.....</p>
<p>About the accident - further details</p>	<p>What happened?</p>	<p>.....</p>
<p>About the accident - further details</p>	<p>Details of any injury/loss:</p>	<p>.....</p>
<p>Statement</p>	<p>I certify that the statements made above correctly describe the accident.</p>	<p>Signed:..... Date:.....</p>

<p>Personal details of any witnesses (please attach separate sheet if more than one witness)</p>	<p>Name: Address: Telephone:</p>	<p>.....</p>
<p>Written statement of witness (please attach separate sheet if necessary)</p>	<p>.....</p>	
<p>Details of volunteer organiser</p>	<p>Do you verify that the events described here occurred to the best of your knowledge?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Statement</p>	<p>I verify the statements made.</p>	<p>Name:..... Signed:..... Date:.....</p>
<p>This report should be forwarded within 14 days of the date of the accident to:</p>	<p>Volunteer Development Co-ordinator Poppyscotland Unit 15 Claremont Centre 15-39 Durham Street Glasgow G41 1BS</p>	
<p>Date accident report form received</p>	<p>Date:</p>	<p>.....</p>



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