

RISK COMMUNIQUÉ

SCHOOL BUS ACCIDENT FILE SUMMARY

DATE OF ACCIDENT: _____ LOCATION: _____

BUS DRIVER NAME: _____

BUS #: _____ INTERNAL FILE NUMBER: _____

ENCLOSURES:

<input type="checkbox"/>	DISPATCH ACCIDENT LOG
<input type="checkbox"/>	ACCIDENT SCENE CHECKLIST
<input type="checkbox"/>	PASSENGER POSITION CHART
<input type="checkbox"/>	PASSENGER INJURY LIST
<input type="checkbox"/>	WITNESS STATEMENTS
<input type="checkbox"/>	FIELD SKETCH
<input type="checkbox"/>	FIELD NOTES
<input type="checkbox"/>	PHOTOGRAPHS WITH IDENTIFICATION
<input type="checkbox"/>	NEGATIVES
<input type="checkbox"/>	VIDEOTAPE (IF STORED SEPARATELY NOTE WHERE: _____)
<input type="checkbox"/>	NEWSPAPER REPORTS
<input type="checkbox"/>	TV NEWS ON VIDEOTAPE (STORED: _____)
<input type="checkbox"/>	POLICE REPORT (REPORT #: _____)
<input type="checkbox"/>	BUS MAINTENANCE RECORDS
<input type="checkbox"/>	ROUTE SHEET
<input type="checkbox"/>	TACOGRAPH
<input type="checkbox"/>	CORRESPONDENCE REGARDING ACCIDENT
<input type="checkbox"/>	PREVENTABILITY / CONTRIBUTING FACTORS DETERMINATION
<input type="checkbox"/>	RE-TRAINING RECORD
<input type="checkbox"/>	OTHER PHYSICAL EVIDENCE (DESCRIBE: _____) (STORED: _____)
<input type="checkbox"/>	OTHER ITEMS (DESCRIBE: _____)

Individual responsible for this file and all physical evidence:

Name: _____ Position: _____

Does any other person have access? Yes No Who? _____

Signed: _____ Date: _____

This is a sample guideline furnished to you by Glatfelter Public Practice. Your organization should review it and make the necessary modifications to meet the needs of your organization. The intent of this guideline is to assist you in reducing risk exposure to the public, personnel and property. For additional information on this topic, you may contact your GPP Risk Control Representative. www.glatfelterpublicpractice.com