

Sample Incident Report Form

Intended to be used as a sample checklist to aid in formal incident reporting. Not to be submitted as a formal incident report.

Store Information

1. Store number:
2. Store address:
3. Date of incident:
4. Time of incident:
5. Manager on duty:

Person Completing This Report

1. Name:
2. Role/position:
3. Date and time report completed:
4. Type of Event
 - a. Check one: Incident (resulted in harm, loss, or property damage) Near miss (could have resulted in harm or loss, but did not)
5. Category:
 - a. Check all that apply: Customer behavior / conflict Employee injury or illness Theft / robbery / security issue Slip, trip, or fall Hazardous condition (spill, obstruction, broken equipment, etc.) Product/safety issue (food safety, age-restricted items, etc.) Other (describe):

People Involved

1. Was anyone injured? Yes / No
2. Names and roles (customer, employee, vendor, other):
3. Contact information (if available):

Description of What Happened

1. Describe the incident or near miss in detail.
 - a. Include: What happened Where in the store it happened What led up to it What you and others did in response
2. Were any safety procedures followed?

- a. If yes, which ones (for example: de-escalation steps, emergency response steps, equipment use, etc.)?
- 3. Were any safety procedures not followed or unclear?
 - a. If yes, explain. Immediate Response and Actions Taken
- 4. What immediate actions were taken?
 - a. (For example: cleaned spill, moved customer to safe area, called 911, notified manager, reviewed security cameras.)
- 5. Was medical attention needed? Yes / No If yes, describe (first aid, ambulance, hospital visit, etc.):
- 6. Was law enforcement or another external party contacted? Yes / No If yes, who was contacted and when? Contributing Factors (if known)
- 7. Did any of the following contribute?
 - a. Check all that apply: Inadequate lighting Wet or cluttered floor Equipment issue or malfunction Policy not followed Policy unclear or not known Customer behavior Staffing levels / workload Training issue Other (describe):

Prevention and Follow-Up

- 1. What could be done to prevent this type of incident or near miss in the future? (For example: more frequent safety talks, additional training, clearer signage, policy change, equipment repair.)
- 2. Does this incident suggest a need for training or refresher training in any of these areas?
 - a. Check all that apply: Customer service De-escalation Safety procedures (store security, handling difficult situations) Emergency response Product safety (food handling, temperature control, age-restricted items) Other (describe):

Manager Review

- 1. Manager name (print):
- 2. Date reviewed with staff:
- 3. Summary of discussion with team (key points, decisions, and one or two improvements to implement):
- 4. Follow-up actions and deadlines (who will do what, and by when?):
- 5. Manager signature:
- 6. Date: