** Butterfly Nursery School**

**Church Road**

**Horne**

**Surrey**

**RH6 9LA**

**01342 843655**

 **Incident Form**

|  |  |
| --- | --- |
| Date |  |
| Who was involved in the incident? Please circle | Child Adult Member of staff |
| Name |  |
| Date of Birth |  |
| Date of incident |  |
| Time of incident |  |
| Place incident occurred  |  |
| Explain fully the events leading up to the incident and the incident itself |  |
| Witnessed by |  |
| Is there anything we could do to prevent this happening again? |  |
| Staff signature |  |
| Manager signature |  |
| Parent signature & print name |  |