



Report of Injury for Non-Employees

The injured individual, or their parent/guardian if they are under the age of 18, must complete this form.

EMPLOYEES CANNOT USE THIS FORM. If you were injured while completing your job duties, you must use the Employee Report of Injury and refer to the Procedures at <https://www.du.edu/risk/workers-compensation>.

Personal Information

Full Name _____ Date of Birth ____/____/____
 If injured person is under the age of 18, Parent/Guardian Full Name _____
 Local Mailing Address _____ City _____ State _____ Zip _____
 Telephone Number _____ Email address _____
 Gender Male Female Non-binary
 If you have one, your DU ID #: 87 _____

Injured person's primary affiliation with DU Student Alumni Event attendee Program participant Volunteer
 Visitor Parent of student/participant Other: _____

Incident/Accident Information

Date of Incident ____/____/____ Date Reported ____/____/____
 Time of Injury ____:____ AM PM
 Accident Location. Please include the building, indoor/outdoor, side of building, room number, etc.:

Did you report the injury to anyone else? No Yes If so, to whom? _____

Were you working as an employee or unpaid intern when the injury occurred? Yes No. If you answered yes, you must complete the Employee Report of Injury form at <https://www.du.edu/risk/workers-compensation>.

If there was a delay in reporting the injury, please explain the reason for the delay: _____

Were there any witnesses to the incident or accident?

Name(s) _____ Relation _____ Phone Number(s) _____
 Name(s) _____ Relation _____ Phone Number(s) _____

Provide a detailed description of how the incident/accident occurred. Attach additional pages if needed. Include what you were doing at the time of the injury, surface conditions (icy, wet, dry), equipment being used, specific location, etc.

Body part(s) injured _____ Left Right N/A

Did you/do you plan to go to the doctor? Yes No Where? _____

Signature _____ Date ____/____/____

If the injured person is under the age of 18, their parent or guardian must complete and sign this form.

Return this completed form to risk@du.edu. If you have any photos, please also attach those to your email.

If you want to encrypt the email, please put "DU Confidential" in the subject line.