



CAMPUS FACILITIES SAFETY

NEAR MISS REPORT

Near Miss Reporting is the process of identifying and preventing an unsafe act or unsafe condition before it causes an injury or illness. This form is used to formally document the recognition of a hazard, the change that is made to prevent a reoccurrence of the hazard and to share the lessons learned with the University.

All information is required.

Incident Date:

Location:

Department:

Incident Time:

Name:

Description of near miss. Explain the following:

- 1) **Who** was involved in the near miss
- 2) **What** exactly happened
- 3) **Where** did the near miss occur
- 4) **When** did the near miss occur
- 5) **How** did the near miss occur

Personal Protective Equipment (PPE) Used:

What acts or conditions led directly to the near miss incident?

What steps have/will be taken to prevent a similar accident?

Who is responsible for taking these actions and following up to see that they are complete?

Expected Completion Date:

Actual Completion Date:

Signature:

****Send completed form to Campus Facilities Safety Coordinator.***