

SAMPLE

Assault Incident Report Form, Page Two

Please check any risk factors applicable to this incident. Each company should develop and include a list of potential risk factors that may apply in its worksite.

- Working with money
- Working with drugs
- Working in a high-crime area
- Working late at night
- Poor lighting outside of worksite
- Other risk factor: _____
- Other risk factor: _____

What steps could be taken to avoid a similar incident in the future?
(To avoid recreating trauma, sound judgment should be exercised in deciding when to request this information.)

Send completed form to: _____