



Incident Notification

Date of report:

1. Names(s) of person reporting and contact details	
Name:	Telephone:
Position:	Email:
2. Details of the incident	
Date of incident:	What happened:
Time of incident:	
Location of Incident:	
Police notified:	
3. Details of Person(s) directly involved in the incident	
Name:	
Contact details:	
Name:	
Contact details:	
Name:	
Contact details:	
Was anyone injured or hurt?	Yes No
Other relevant information:	

If more space is required, please write on the back of this sheet.

If you have witnessed an incident involving Global School Partners or partner GSP-KC please complete this form.

Please return completed form to the Global School Partners, or GSP-Kenya Chapter, representative that you received it from; or

Email it to admin@globalschoolpartners.org.au