

Office Use:

Reference No Khalsa Way, Off Alice Way, Hounslow, Middx., TW3 3UD

INCIDENT REPORTING FORM



Incident details:

Date & Time of incident: Name (age):

Gurdwara site details:

Incident details: please continue overleaf or on additional paper if necessary

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Injuries incurred as a result of the incident:

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Details of external involvement: ☐ Police ☐ Fire ☐ Ambulance

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How the incident was resolved (if applicable)
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Follow up actions (if applicable)

Witnesses (if applicable)

Name of person reporting Contact details

You can also provide your feedback via our website www.sgss.org/feedback or scan the above QR code.