



Nicholson School of Communication and Media

Student Production Incident Report Form

Use this form to report any on-set accidents or near misses to the Film and Mass Media Program. Email a completed copy to both your instructor-of-record and the Operations Manager (Broadcast or Film).

Date of Incident:	Time of Incident:
Date / Time Reported: /	Location of Incident:
Injured Person (Full Name):	
UCF Student or Volunteer:	Crew / Cast Position:
Age:	Legal Guardian Name (If a Minor):
Address:	Telephone:
Nature / Extent of Injuries:	
Type of First Aid Rendered:	By Whom:
Taken to Hospital:	By Whom (If Applicable):
Hospital Name / Address (If Applicable):	Physician Name (If Applicable):
Witnesses Names / Contact Info:	
Description of Incident:	
Reported by:	Signature: