



ISD #118 Northland Community Schools

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Remer, MN 56672
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STUDENT ACCIDENT REPORT

Name of Student: _____ Age: _____ Grade: _____

Parent's Name(s): _____

Address: _____

School: Remer Elementary _____ Northland High School _____

Date of Injury: _____ Class Hour: 1 2 3 4 5 6 7

Date Reported to School Officials: _____

Specific Injury: _____

Where Accident Happened: _____

Activity Involved: _____

Action Taken with Student: _____

Student was at a school sponsored activity as a: Participant _____ Spectator _____

If student was engaged in a school sponsored event, was it an interschool activity? Yes _____ No _____

Supervisor on Duty: _____ Title: _____

Was the activity sponsored and supervised by the district? Yes _____ No _____

Parents Notified _____ Doctor Notified _____ Name of EMT Consulted _____

Other Pertinent Information: _____

How could this accident been avoided? _____

Staff Reporting Signature: _____ Date: _____

Administration Signature: _____ Date: _____