



Task Title: Complete An Incident Report

OALCF Cover Sheet – Learner copy

Learner Name: _____

Date Started (m/d/yyyy): _____

Date Completed (m/d/yyyy): _____

Successful Completion: Yes No

Goal Path: Employment Apprenticeship

Secondary School Post Secondary Independence

Task Description: Completing an incident report at work.

Competency: A: Find and Use Information B: Communicate Ideas and Information C: Understand and Use Numbers

Task Groups: A1: Read continuous text B2: Write continuous text
B3: Complete and create documents C2: Manage time

Level Indicators:

- A1.2: Read texts to locate and connect ideas and information
- B2.2: Write texts to explain and describe information and ideas
- B3.1a: Make straightforward entries to complete very simple documents
- C2.1: Measure time and make simple comparisons and calculations

Performance Descriptors: See chart on last page

Task Title: CompleteAnIncidentReport_E_A1.2_B2.2_B3.1a_C2.1

Materials Required:

- Incident report form
- Pen
- Paper for rough draft
- Dictionary and thesaurus

Learner Information

Employees are sometimes asked to complete an incident report if they witness an accident or an event where fire, police or ambulance needed to be called.

Work Sheet

Task 1: Fill out the top portion of the “Insurance Report” using the following details:

You operate a drill press in a factory called Kolman. It is located in Barrie on Oak Street at number #41. Your employee number is 256. On January 3rd around 11:15 in the morning, there was a fire at the factory which began in the north corner of the large room that contains your drill press. No one was hurt in the fire, but the factory was closed for repairs for three weeks. It is now the first day of the next month, and you have to fill out a report for the insurance agency. The agency is trying to find out what caused the fire and wants to know what you saw.

Task 2: Complete the “Description of Incident or Accident” section using the following details (these details need to be sorted into a logical order):

Before you left your drill press you saw the following in no particular order:

- **an employee throws a cigarette butt accidentally into the vat of wood stain**
- **the vat of wood stain catches on fire**
- **smoke quickly fills the room with haze**
- **a woman employee runs to the fire alarm and yells “Fire”**
- **a foreman waves his arms wildly at a maintenance man**
- **the maintenance man hits the sprinkler pipes with a long piece of wood**
- **water from the sprinkler pipes begins to fall**
- **employees run to the exits on the east side of the building**

You can add other details that you think are important if they are not supplied. When writing the description of the incident, use your own words, and write it in a story form, using complete sentences.

Insurance Report

Date of Incident: _____ Employee # _____

Name of Company

Address: _____
Street Unit

City Province Postal Code

Phone: _____ - _____ - _____ Location of incident _____
Area code

Description of Incident or Accident (Attach additional paper if necessary)

Reported by: _____ Signature: _____

Position: _____ Date: _____

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This task: Was successfully completed Needs to be tried again

Learner Comments:

Instructor (print):

Learner Signature:
