

SPEED S.E.J.A. #802
SPEED SUPERVISOR'S REPORT

Supervisor's Name: _____

Claimant Name: _____

Date of Accident: _____ Time of Accident: _____

Place of Accident: _____

Date Supervisor was notified of above accident: _____

Describe Accident as alleged by Claimant: _____

Describe injuries as alleged by Claimant: _____

List names of witnesses to the occurrence: _____

Date Claimant notified school district of alleged accident: _____

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Supervisor's Signature: _____

Date: _____