

# Near Miss Reporting Tool

(A near miss does not result in injury, illness, or damage, by definition, but it had the potential to do so.  
This form is a tool to gather information. If an injury has occurred, use the incident reporting tool.)

## General Incident Details

### **\*Required Fields**

\*Incident Date: \_\_\_\_\_ Incident Time (in 24-hour format): \_\_\_\_\_

\*Report Date: \_\_\_\_\_

Date Reported to Council/BSA Location: \_\_\_\_\_

Reported by Name: \_\_\_\_\_

Reported by Primary Phone: \_\_\_\_\_ Reported by Secondary Phone: \_\_\_\_\_

Reported by Email: \_\_\_\_\_

Reported by Address: \_\_\_\_\_

Reported by City: \_\_\_\_\_ Reported by State: \_\_\_\_\_ Reported by Zip Code: \_\_\_\_\_

\*Council/BSA Location: \_\_\_\_\_ \*Location of Incident: \_\_\_\_\_

Specific area where incident occurred: \_\_\_\_\_

Incident Address: \_\_\_\_\_

Incident City: \_\_\_\_\_ \*Incident State: \_\_\_\_\_ Incident Zip Code: \_\_\_\_\_

\*Description of Incident (clear/concise/complete facts):

Was an Agency or Authority Notified?  Yes  No Whom: \_\_\_\_\_

## Near Miss Details

Adventure/Program/Event: \_\_\_\_\_

General Classification (Cub Scout/Registered Leader/etc.): \_\_\_\_\_

\*Lessons Learned (what could be done to prevent future occurrences):

Severity Rating:  Catastrophic-I  Critical-II  Marginal-III  Negligible-IV  Unknown

## Witnesses

(Use back of form to record other details and witness contact information)

