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APPENDIX 5 Part 800.6(i)(3)

Workplace Violence Incident Report

1. Date of Incident_____

2. Time of day/shift when the incident occurred_____

3. Workplace Location where incident occurred_____

4. Provide a detailed description of the incident including:
   Events leading up to the incident and how the incident ended;
   Names and job title of involved employee(s);
   Name or other identifier of other individuals involved;
   Nature and extent of injuries arising from the incident and;
   Name of witnesses

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Note: Refer to 12 NYCRR Part 800.6 Section (i)(3)(ii) for special instruction on privacy concern cases. Print additional sheets if necessary.