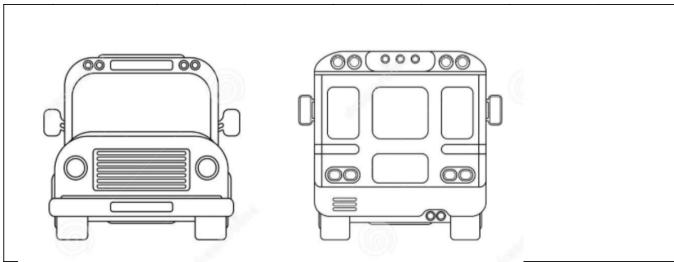
	Bus Driver Incident Report Fo	orm		
Name:	Date:			
Bus #/ UCA Vehicle:	Date of incident:	Time of incident	:	
Location of incident:	Date employee was sent for Drug/ Alcohol Screening:	Results of Screening:	Pass	Fail
Elementary School	If other, please report details:			
Middle School				
High School				
Central Office				
Other				
	Detail Summary of Incident	::		
Please	indicate specific damages to ve	hicle below:		



iSurity has to be contacted within 24 hours of an incident. Doing this allows is to protect UCA rights under the workers compensation law by completing the investigation process promptly, as well as directing medical care. The most crucial time of a claim is the first 24 hours. Each day that passes after the date of injury, pertinent information related to the claim can be lost, as well as UCA's rights under the law. This report is due into the Industrial Commission's office within the (5) day period. As indicated above, reporting claims immediately is required under the policy contract. Failure to comply with this obligation could result in actions up to and including cancellation of the policy contract.