Bowdoin College
Accident/Incident Investigation Form – Witness Statement

**Witness Statement of Accident**

**Witness #1**

Name of employee involved in accident:

Please describe your observation of the accident:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Do you have any suggestions to help prevent future accidents such as this?

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Witness Signature: ____________________________  Date: __________

**Witness #2**

Please describe your observation of the accident:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Do you have any suggestions to help prevent future accidents such as this?

__________________________________________________________________________________

Witness Signature: ____________________________  Date: __________