



## Employee Injury Report Form

Employees are required to promptly report all work related accident/injury or illness to Campus Police at (616) 234-4010, and their supervisor or department head.

Report on this form all accident/injuries, including diseases which arise out of and in the course of employment. Entire form must be completed. **If medical treatment is needed, it is imperative that you follow the correct procedure.** If you wish to seek medical treatment, you will need an Occupational Services Authorization to Treat" form before going to one of the centers listed below.

### Injured Employee:

Full Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street Address, City, State, Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ SS#: \_\_\_\_\_

Occupation: \_\_\_\_\_ Building Assigned: \_\_\_\_\_

Place of Accident or Exposure: \_\_\_\_\_ Did accident/injury occur on employer's premises? \_\_\_\_\_

Date of Injury: \_\_\_\_\_ Time of Injury(AM or PM): \_\_\_\_\_ Start Time of Shift (AM or PM): \_\_\_\_\_

Description of Injury  
\_\_\_\_\_  
\_\_\_\_\_

What was employee doing just before the incident occurred? \_\_\_\_\_

How did injury occur? \_\_\_\_\_

Describe the nature of injury or illness: \_\_\_\_\_

Part of body directly affected by the injury or illness \_\_\_\_\_

What object or substance directly harmed the employee? \_\_\_\_\_

Witness to accident: \_\_\_\_\_

**If medical assistance is needed it is imperative that you follow the correct procedure. A signed authorization slip must be obtained from authorized personnel. This authorization to treat form must accompany you to the clinic.**

Do you wish to seek treatment?

\_\_\_\_\_  
Supervisor Signature-Date

\_\_\_\_\_  
Employee Signature-Date

Spectrum Health Occupational Clinic Locations	
<b>Spectrum Health Occupational Service Clinics</b>	<b>Hours subject to change, call first (616) 391-2778</b>
• <b>Downtown:</b> 426 Michigan Street NE	Monday-Friday 7:00 am - 5:00 pm
• <b>South 28<sup>th</sup> St:</b> 3350 Broadmoor SE	Monday-Friday 7:00 am - 5:00 pm
• <b>Grandville:</b> 6105 Wilson Ave SW	Monday-Friday 7:00 am - 5:00 pm
• <b>Greenville:</b> 705 S. Greenville West Dr. Suite 102 B	Monday-Friday 7:30 am - 4:30 pm
• <b>Ada:</b> 7128 Fulton St E	Monday-Friday 7:00 am - 5:00 pm
<b>After-Hours Emergent Injury Care:</b> Blodgett Hospital Location-1840 Wealthy St SE (Adjacent to Emergency Room) (616) 391-0234	

**IF YOU HAVE ANY QUESTIONS OR CONCERNS, CONTACT HUMAN RESOURCE AT (616) 234-4052**

Employee and supervisor keep a copy for your records and send completed document to the Human Resources Department.