

**EDINBURG CONSOLIDATED INDEPENDENT SCHOOL DISTRICT**  
**Edinburg, Texas**

**NEAR –MISS INCIDENT REPORT**

Name: \_\_\_\_\_ Campus/Dept.: \_\_\_\_\_

Date of Incident \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location of Incident: \_\_\_\_\_

\_\_\_\_\_

Description of Incident: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Action(s) Taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

(Employee Signature)

\_\_\_\_\_ Date: \_\_\_\_\_

(Principal/Director/Supervisor Signature)

**Checklist:**

\_\_\_\_\_ Original on file at principal's or Director's Office

\_\_\_\_\_ Copy to Safety/Risk Management Office

**Office of Safety/Risk Management Use Only:**

Date Received: \_\_\_\_\_ Initials: \_\_\_\_\_

**Nondiscriminatory Statement**

It is the policy of Edinburg CISD not to discriminate on the basis of sex, age, handicap, religion, race, color, or national origin in its educational programs.