Send the application to:
Brunswick Institute
8 Prowse Street Brunswick
VIC 3056 Australia

Phone: +61 3 98574086
Email: admissions@brunswick.edu.au
Web: www.brunswick.edu.au

CRITICAL INCIDENT REPORT FORM

Student details			
Full name		Date of birth	
Student ID No.		Phone number	
Email			
Address			
Incident information: Who has involved?			
Incident information: What has happened?			
Incident information: How did it happen?			

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Incident information: What is the current situation?
Incident information: What actions have already been taken?
Incident information: What further actions are required?
Incident information: Who needs to be informed? Who has already been informed?

Student signature			
Student signature		Date	
Witness			
Witness name		Witness contact details	
Witness signature		Date	