

**ACCIDENT REPORT**

**for Children in Daycare Centers, Pupils, Students**

**2** Provider of funding: State of Baden-Württemberg

**1** Name and address of institution

Karlsruhe Institute of Technology (KIT)

P.O. Box 6980

76049 Karlsruhe, Germany

**3** Company number of the accident insurance company

918084249083002

**4** Addressee

By email to: [studierendenservice@sle.kit.edu](mailto:studierendenservice@sle.kit.edu)

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**5** Last name, first name of insured person

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**6** Date of birth      Day      Month      Year

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**7** Street, number      Postal code      Place

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**8** Gender      **9** Nationality      **10** Name and address of legal representatives

Male       Female

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**11** Fatal accident?      **12** Time of accident      **13** Location of accident (precise place and street with postal code)

Yes     No      Day Month Year Hour Minute

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**14** Detailed description of the circumstances of the accident (type of event; in case of sports accident, type of sport)

This information is based on the description given by     the insured person     other persons

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**15** Injured parts of the body      **16** Type of injury

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**17** Did the insured person interrupt the visit of the institution?  No     Immediately  Later, on    Day    Month

at Hour      Min.

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**18** Did the insured person resume the visit again?     No     Yes, on    Day    Month    Year

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**19** Who was the first to notice the accident? (Name, address of witness) Was this person an eye witness of the accident?  
 Yes  No

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**20** First treatment: **21** Start and end of the practice / hospital

Name and address of physician or hospital	Hour	Minute	Hour	Minute
	Start		End	

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**22** Date Head (commissioner) of the institution Telephone number for questions (contact person)

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## I. General Explanations

- **Who** has to report the accident?  
The **employer** (provider of material expenses) has to report the accident. If the school authority is no employer, the school authority or a person authorized by it has to report the accident. Authorized persons are persons authorized by the employer to report accidents. In schools or daycare facilities, this usually is the head of the institution.
- **When** does an accident have to be reported?  
The accident must be reported when an activity associated with the visit of the institution or an accident on the way from home to the institution or from the institution to home results in the death of an insured person or when the insured person is injured such that it has to undergo a medical treatment.
- **Where must the report be sent?**  
The accident report must be sent to the responsible accident insurance company.
- **Who must be informed** about the accident report?  
Insured persons for whom an accident report is submitted – if under the age of 18, their legal representatives – must be informed about their right to request of copy of the report.
- **How** must the accident be reported?  
The report may be sent by ordinary mail or by data transmission, if this is offered by the addressee on the latter's homepage, for instance.
- **Within which period** does an accident have to be reported?  
The employer or authorized person must report an accident **within three days** after having obtained knowledge thereof.
- What has to be done in case of **severe** accidents, massive accidents, and deaths?  
Fatal and massive accidents as well as accidents causing serious damage to health must be reported **promptly** to the accident insurance company (by phone, fax, email).

## II. Explanations Relating to the Questions of the Accident Report

- 2 Enter the authority funding the institution (e.g. municipality, city); already entered
- 3 Enter the company no. (membership number) given by the accident insurance company; already entered
- 14 The description of the course of the accident should contain detailed information on the accident and its circumstances (e.g. where, why, how, under which conditions did the accident occur). In particular, information on the following aspects should be included:
  - **Place, at which the accident happened**  
e.g. on the corridor, on the schoolyard, in the seminar room, in the sports hall

- **Type of event**  
e.g. regular lessons, Bundesjugendspiele, excursion, support classes, lunch-time childcare
- **Circumstances characterizing the course of the accident**  
e.g. crash with the bicycle, slipping on the floor, running into other pupil, clashes/disputes of students, stumbling off the stairs, injury due to snowball
- **Special conditions**  
e.g. ice, humid soil or leaves, handling of hazardous substances

In case of school sports accidents, the type of sports and the type of event (mandatory lessons, team, mandatory elective subject, optional subject, school sports competition) must be entered.

The description of the accident may be continued on the rear or on an additional sheet.

15 Examples: Right forearm, left index finger, left foot, right side of the head

16 Examples: Bruise, bone fracture, sprain, burn, laceration, cut