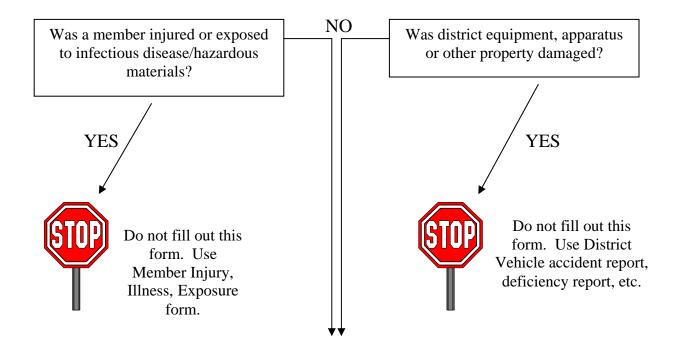
## Near Miss Flowsheet and Reporting Form



Turn page over and answer questions. Drop completed form into Safety Suggestion Box or give to the Safety Officer or the Health and Safety Officer.

## Please be specific. Attach additional pages if necessary. Name(s) not required.

Describe the incident – what happened, and how it happened:
Describe the events that lead up to the incident, including what you were thinking before it happened:
What did you learn, or what should be done to prevent this from happening again to someone else?