

Employee:

Location:

D.O.I.:

EMPLOYEE INJURY INVESTIGATION QUESTIONNAIRE

1. Could this injury have been more severe? If so, how?
2. Other than the direct costs of your injury how does your injury affect you and your family, co-workers, company and customers?
3. Describe the task or situation that you were involved in that led to your injury?
4. What could you have done differently to prevent this injury from occurring?
5. What can you do as an individual to improve your safety performance?