"NOTICE OF INJURY OR OCCUPATIONAL DISEASE"

(Incident Report)

Pursuant to NRS 616C.015

Name of Employer _____

Nye County School District 484 S. West St. Pahrump, NV 89048 (P)775-727-7743 (F)775-727-7900

Name of Employee			Social Sec	Social Security Number		Telephone Number		
Date of Accident (if applicable)	Time of Accident Place (if applicable)		Place where accid	where accident occurred (if applicable)				
What is the nature of the injury or occupational disease?				List	List any body parts involved:			
Briefly describe accident or circumstances of occupational disease: (Note: if you are claiming an occupational disease, indicate the date on which employee first became aware of connection between condition and employment) Names of witnesses:								
Did the employee YES If yes, when leave work because NO of the injury or NO occupational disease? NO		If yes, when	(date and time)?		Has the employee YES returned to work? NO		If yes, when (date and time)?	
Was first aid YES If yes, by whom? provided? NO		nom?	Name and address of treating physician, if applicable or known					
Did the accident happen YES in the normal course of work? (if applicable) NO								
Was anyone YES Na else involved? NO			Names of othe	ames of others involved				
MY EMPLOYER/INSURER MAY HAVE MADE ARRANGEMENTS TO DIRECT ME TO A HEALTH CARE PROVIDER FOR MEDICAL TREATMENT OF MY INDUSTRIAL INJURY OR OCCUPATIONAL DISEASE. I HAVE BEEN NOTIFIED OF THESE ARRANGEMENTS.								
Supervisor ' s Signature		Dat	Date		Signature of Injured or Disabled Employee Date			
TO FILE A CLAIM FOR COMPENSATION, SEE REVERSE SIDE, SECTION ENTITLED, CLAIM FOR COMPENSATION (FORM C-4).								
For assistance with Workers' Compensation Issues you may contact the Office of the Governor Consumer Health Assistance <u>Toll Free</u> : 1-888-333-1597 <u>Web site</u> : http://govcha.state.nv.us <u>E-mail</u> cha@govcha.state.nv.us								

Employee should sign, date and <u>retain</u> a copy. *Original to Employer, Copy to Employee*

Send original to Ray Ritchie/Rachel Owens Nye County School District 484 S. West Street Pahrump, Nevada 89048