



Written Statement

Use this form to document written statements.

Location: _____ Incident/event Date: _____

Employee Name: _____ Phone: _____

Supervisor: _____ Phone: _____

Witness Name: _____ Phone: _____

Additional Information: _____

Please provide a written statement regarding the event(s) in question, according to your point of view as you recall.

To the best of my knowledge, the above information is truthful and accurate.

Employee Signature

Date