

UNIVERSITY OF HARTFORD

THE HARTT SCHOOL COMMUNITY DIVISION

Injury Report

This form is to be completed in the event of a student injury. Following completion, please submit the form to dancedesk@hartford.edu.

Date: _____

Student Name: _____

Level Placement: _____

Injury description:

When did this injury first arise?

How did this injury occur?

Has the student been seen by a doctor?
If so, when and what was the outcome?
(Please provide a doctor's note)

Additional information:
