

Witness Declaration Form Sample for Workplace Incidents

The **witness declaration form** sample provides a standardized template for reporting workplace incidents accurately and efficiently. It ensures essential details are documented objectively, aiding in investigations and legal compliance. Utilizing this form helps maintain a safe and transparent work environment.

Witness Information

Full Name:

Job Title/Position:

Department:

Contact Information:

Incident Details

Date of Incident:

Time of Incident:

Incident Location:

Detailed Description of Incident:

Other Persons Involved (if any):

Declaration

I hereby declare that the information provided above is true and accurate to the best of my knowledge.

Signature:

Date:

Submit Declaration