

**NEAR MISS REPORTING FORM**  
 USAG, FORT RILEY SAFETY OFFICE  
 500 HUEBNER ROAD, ROOM 12 | FORT RILEY, KS 66442  
 (785) 240-0647



**INCIDENT INFORMATION**

TODAY'S DATE:  DATE/TIME OF INCIDENT:

PERSON INVOLVED (Last, First, MI):

DIRECTORATE:

NEAR MISS TYPE:  NEAR MISS CATEGORY

**CONTACT INFORMATION**

PERSON SUBMITTING (Last, First, MI):  TITLE/POSITION:

PHONE NUMBER:  EMAIL:

**EVENT DETAILS**

**Near Miss Location:** (Site of Incident i.e. Room No., Stairs, Hallway, etc.) If outside, give location in reference to nearest building.

**Near Miss Description:** (Describe fully the nature of the incident including factors involved).

**RISK ASSESSMENT**

RISK ASSESSMENT MATRIX				
SEVERITY \ PROBABILITY	Catastrophic (1)	Critical (2)	Marginal (3)	Negligible (4)
Frequent (A)	High	High	Serious	Medium
Probable (B)	High	High	Serious	Medium
Occasional (C)	High	Serious	Medium	Low
Remote (D)	Serious	Medium	Medium	Low
Improbable (E)	Medium	Medium	Medium	Low
Eliminated (F)	Eliminated			

**SEVERITY:**

**PROBABILITY:**

**RISK LEVEL:**

Describe corrective actions taken to prevent reoccurrence of this incident:

Additional comments:

*\*If you have problems submitting. Save form and email to:  
 dawn.j.douglas.civ@mail.mil*