|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Meldingsformulier ‘ongewenst gedrag incident’ | | | | | | | | | | | | | |
| **Gegevens medewerker** | | | | | | | | | | | | | |
| naam | |  | | | | | | | | Relatienummer | | |  |
| **Gegevens incident** | | | | | | | | | | | | | |
| Datum | |  | | Tijdstip | |  | | | Locatie | |  | | |
| **Gegevens agressor** | | | | | | | | | | | | | |
| naam | |  | | | | | | | | | | | |
| adres | |  | | | | | | woonplaats | | | |  | |
| Is de agressor een medewerker van IW? | | | | | | | |  | | | | | |
| **Aard van het incident** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Omschrijving van het incident** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Gevolgen incident** | | | | | | | | | | | | | |
| Is er sprake van letsel? | | | | | | | | | | | | |  |
|  | Zo ja welk letsel? | | | |  | | | | | | | | |
| Is er sprake van schade aan persoonlijke eigendommen van de medewerker? | | | | | | | | | | | | |  |
|  | Zo ja welke? | | | |  | | | | | | | | |
| Is er sprake van schade aan eigendommen van de werkgever? | | | | | | | | | | | | |  |
|  | Zo ja welke? | | | |  | | | | | | | | |
| Wat is het schadebedrag? | | | | | € | | Zal deze worden verhaald? | | | | | |  |
| Zijn er geweldsmiddelen gebruikt? | | | | | | | | | | | | |  |
|  | Zo ja welke? | | | |  | | | | | | | | |
| Is er sprake van een arbeidsongeval? | | | | | | | | | | | | |  |
|  | Zo ja | | | | Ongeval meldingsformulier invullen! | | | | | | | | |
|  | | | **Medewerker** | | | | | | | | | | |
| handtekening | | |  | | | | | | | | | | |
| datum | | |  | | | | | | | | | | |