



INSTRUCTOR REPORT – VEHICLE SERIOUS CRASH FORM

Oregon Department of Transportation
Transportation Safety Office Driver Education Program

This form is to be completed by the instructor when a crash involving a driver education program vehicle results in serious injury or death, including injuries/death to anyone outside the driver education vehicle.

1. As soon as possible, call the ODOT TSO Driver Education Program at (503.580.8112 or 971.283.1030) to report the crash.
2. Within three days of the crash, submit a copy of this completed form to the ODOT TSO Driver Education Program at ODOTDEMail@odot.oregon.gov. You will also need to submit a copy of the DMV Crash Report.

Date / Time of Crash: _____

Location of Crash: _____

Driver Name: _____ License No: _____ Injuries: _____

Instructor's Name: _____ License No: _____ Injuries: _____

Passenger's Name: _____ License No: _____ Injuries: _____

Passenger's Name: _____ License No: _____ Injuries: _____

Passenger's Name: _____ License No: _____ Injuries: _____

Other vehicle(s) involved: _____

License plate number(s): _____

Driver Name: _____ License No: _____ Injuries: _____

Driver Name: _____ License No: _____ Injuries: _____

Driver Name: _____ License No: _____ Injuries: _____

Driver education program name (school name): _____

Your supervisor's name (Mr/Ms): _____

Describe what happened:

Contributing factors:

Responding agencies (police, ambulance, etc.): _____
