

DIRECTIONS FOR FILLING OUT WORKMEN'S COMP FORMS

- Fill out the Employee's Report of Injury (Accident Information) as thoroughly as possible – boxes 1-13 (if applicable). Leave box 14 blank.
- Then fill out South Dakota Employer's First Report of Injury.
 - 1) Fill in the "employee" box information.
 - 2) Fill in the "education" box.
 - 3) Fill in the injury/treatment box. Make sure to use the codes on the back page to indicate which body parts are injured. If more than one body part, use code 90 and also the codes for each body part.
 - 4) Date employer notified of report – this is the date you notified either your supervisor or the principal of the building.
 - 5) Fill in what type of treatment and the doctor information if you went to clinic or hospital.
- Leave the rest blank and return to your building secretary as soon as possible.
- Send both forms to Nancy at the Administration Office **within 3 days.**