

License Exempt Provider Serious Injury Report
Child Development and Care (CDC)



Instructions: Complete this form for all serious injuries or deaths which occurred in a license exempt child care setting for those receiving child care subsidy. Complete one form for each incident. Providers are also required to notify parents of any incidents.

***Serious Injury** means any physical harm to a child that requires emergency safety intervention. This includes, but is not limited to, burns, lacerations, bone fractures, significant blood loss, and injuries to internal organs, whether self-inflicted or by someone else.

Report Date Injury Date Injury Location (address and city)

Child(ren) involved in the incident (first and last name)

Child Care Provider Name Provider ID# Provider Phone Number

Parent/Guardian Name Parent Case # Parent Phone Number

Describe the incident. Be specific.

Did the incident cause:

The death of a child?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
A child's broken bone?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
A child needing stitches?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
A child being burned?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Any other serious injury? (If yes, please explain)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Were the police involved? Yes No

Did the incident require a hospital visit? Yes No

Person reporting this incident I am the _____
(parent, caregiver, etc.)

Submit this form to the CDC office by:

Fax:

517-284-7529

or

Mail:

Child Development and Care
P.O. Box 30267
Lansing, MI 48909

*Please Note: This form is not for reporting abuse or neglect. To report suspected abuse or neglect, please call 855-444-3911 or use the online reporting system at www.michigan.gov/mandatedreporter.