

## **INJURY ASSESSMENT PREVENTION SYSTEMS AND WORKERS' COMPENSATION FORMS**

**1930**

(No. 50 March 2004)

### **REPORTABLE INJURIES/ILLNESSES**

**1930.1**

(No. 50 March 2004)

The DWC 1/SCIF-3301 is a claim form provided to the employee when a job related injury and/or illness has occurred or is presumed to have occurred to the employee, inmate, ward or other person performing work on behalf of CAL FIRE. The DWC 1/SCIF-3301 **MUST be provided to the employee or his or her designee within 24 hours from the date of knowledge of an injury and/or illness** or from the date an employee or his/her designee requests the form. The DWC 1/SCIF-3301 is provided (a) when medical treatment has been rendered beyond first-aid, or (b) lost time has been incurred beyond the employee's work shift at the time of injury, or (c) the employee or his or her designee requests the form. If an employee requests the DWC 1/SCIF-3301, it must be provided, even though medical treatment has not been received or time lost from work. Within five calendar days from providing an employee with the DWC 1/SCIF-3301, the employee's supervisor will complete and process the CAL FIRE-3067/Employer's Report of Occupational Injury or Illness as a Reportable claim even if the employee does not return the DWC 1/SCIF-3301. (See Section [1713](#).)

### **RECORD ONLY INJURIES**

**1930.2**

(March 2011)

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