Bemidji State University Health and Safety Concern Form

Reset Form

This form is for use by members of the BSU campus community who wish to report a safety suggestion, hazard, concern, or unsafe workplace condition or practice.

Forward the completed form to Environmental Health and Safety - D345, Box 1

NOTE:

Employees are advised that use of this form or other reports of unsafe conditions or practices are protected by law. It is illegal for an employer to take any action against an employee in reprisal for exercising rights to participate in communications involving safety.

Date: (mm/dd/yyyy)

Location of Hazard (building, room or other description):

Description of hazard:

Suggestion for Improving Safety/Correction of Hazard:

Has this Hazard been reported to your supervisor?	$\Box_{\text{Yes}} \ \Box_{\text{N}}$	$[0 \square N/A]$
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Name:

Campus Address:

Phone:

E-mail:

Thank you for taking the time to report your concerns.