

HFM BOCES Safety Committee Health/Safety Concern Reporting Form



Building:	Date:
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IMPORTANT: This form should be used for persistent issues related to specific Safety & Health Issues that need to be addressed outside of the normal work order system. Please enter routine comfort-related requests through the work order system online. Emergency situations should be reported directly to your program supervisor or the Operations Department at 736-4380.

Health/Safety Concern: Please be as specific as possible:

Signature (required): _____ Print name: _____

Email: _____ Contact Phone: _____

Return the completed form to the building principal or one of the following safety committee members:

David Aimone Craig Barker Bob Brink

Safety Committee Use Only:

Safety Committee Response:

Date Received:

Accept Declined—reason: _____