



EMPLOYEE REPORT OF UNSAFE ACT/ UNSAFE CONDITION FORM

Employees are responsible to continually inspect their work areas, vehicles, and equipment for possible hazards. Potential hazards should be immediately reported to supervisory personnel and may also be documented using the *Employee Report of Unsafe Act or Condition Form*. Required corrective actions should be documented on the forms for any identified deficiencies. Follow-up after corrective actions have been taken should also be documented on the inspection forms.

SECTION 1 - EMPLOYEE:

NAME:	DEPARTMENT/ DIVISION:
DATE/ TIME	LOCATION:
HAZARD OR PROBLEM:	
SUGGESTIONS:	

SECTION 2 – SUPERVISOR:

NAME:	TITLE:
DATE RECEIVED:	
ACTION TAKEN:	
DATE ACTION TAKEN:	

SECTION 3 – DIRECTOR REVIEW:

DATE RECEIVED:
TYPE OF HAZARD:
DIRECTOR NAME:
REVIEW COMMENTS/ ACTION TO CORRECT:

DIRECTOR SIGNATURE

DATE

REVIEWED BY RISK MANAGER

DATE