

Coast Unified School District

SAFETY CONCERN/SUGGESTION

Please use this form to report unsafe or uncorrected conditions that could endanger employees or students, or to make a safety or health-related suggestion to the District Safety Committee.

Do not use this form in lieu of a work order to the maintenance department. Emergency conditions should always be reported immediately to your supervisor.

Return this completed form to your supervisor or any member of the District Safety Committee. **You may also report conditions anonymously** by writing, calling 3905, faxing 7105, the Safety Coordinator.

Site/School: _____

Today's Date: _____ Date condition identified: _____

Your name (optional): _____

Work or office phone number (optional) _____

Has this condition been previously reported? Yes No Unknown

To Whom: _____

Nature of concern or suggestion: _____

If a safety concern, where exactly is the hazardous condition or concern? _____

Additional information: _____
